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THERAPEUTIC NOTES.

PUBLISHED BY

PARKE, DAVIS & COMPANY.

VOL. I. DETROIT, FEBRUARY, 1894. No. 1.

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A COD-LIVER OIL

that owes its palatability to the rejection of certain constituents of the oil is

ABSOLUTELY WORTHLESS.

Unless the pure oil prepared from fresh livers is rendered acceptable to the patient *without discarding essential components*,

PHYSICIANS MAY AS WELL DISCONTINUE ITS USE.

OUR NEW PRODUCT,

IMPROVED

LOFOTEN COD-LIVER OIL,

PREPARED WITH A SPECIAL VIEW TO

PERMANENCY,

does not owe its palatability to the elimination of essential constituents.

We guarantee it a pure Norwegian oil—*the entire oil.*

SUPERIOR TO ANY COD-LIVER OIL ON THE AMERICAN MARKET.

PARKE, DAVIS & CO.,

DETROIT, - NEW YORK, - KANSAS CITY, - U. S. A.,

AND WALKERVILLE, ONT.

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Scientific and Business Platform.

We respectfully invite the attention of physicians and pharmacists to a brief statement of the ethical, scientific and business principles upon which we strive to base our operations as manufacturing chemists. We shall be pleased to communicate with any member of either profession who may desire further literature in amplification of any or all of these principles, and cordially invite such correspondence.

We hold that the manufacturing pharmacist who desires the patronage and values the respect of the physician, should study and conform to those principles of medical ethics which affect the production and marketing of medicinal preparations, therefore:

A. We strive to maintain the highest standard of quality.

Our facilities for securing crude drugs of first quality are unequalled; our processes of manufacture are the latest and best approved; and the highest degree of skill is employed at every stage. Wherever the nature of the drug will permit, the strength of every preparation is determined by repeated assays, from the acceptance of the crude material to the finishing of the product for the pharmacist's shelves. Under other conditions the product is made to conform to some physiological or other recognized test to ascertain its therapeutic efficiency.

B. We do not market any preparation protected by copyright, patent or trade-mark, or by concealed or misrepresented formula.

Please apply to us for literature fully explaining the distinction between these several classes of proprietary preparations, and demonstrating their respective objectionable features.

C. We do not so label or advertise our products as to encourage, or admit of, their use by the public without the advice of the physician.

Any physician who has seen a former patient purchase for himself, and without a doctor's advice, a remedy labeled with the disease which it is designed to cure or alleviate, with full directions as to dose, etc., and which he himself had prescribed on a previous occasion, will appreciate the bearing of this principle upon his purse and reputation.

D. To the end that the product, and the art of its manufacture, may never become lost to science, every medical preparation should have a proper name, open to general scientific usage, and its formula should be published in scientific literature in such a manner that any competent pharmacist may readily prepare it.

Many articles claiming to be pharmaceuticals cannot be admitted to the Pharmacopœia, or accepted in scientific literature, for the reason that the names are claimed as private property, and their formulæ, or art of manufacture, are nowhere published, but are things of trade secrecy. Our processes and formulæ are open to the inspection of all properly interested persons at any seasonable time, and any pharmacist may market any of our preparations under its proper name, if only the same be not represented as of our manufacture.

E. We hold further that the manufacturing chemist should lend his superior resources to the advancement of both medical and pharmaceutical science; that he ought not to act altogether from a selfish pecuniary motive, but should have in view the general well-being of humanity and, as tending to this end, the continued progress of medicine and pharmacy.

In pursuance of this belief, we have expended large sums in therapeutic, physiological and chemical research; employed able botanists in exploring the habitats and studying the characteristics of new drugs; promoted exhaustive physiological experiments to determine their therapeutic value; made expensive tests in our laboratory to determine the most available form of preparation; and have then placed, free of cost, at the disposal of the medical profession, samples of the same for clinical experimentation, until the medicinal value was ascertained. Where no therapeutic worth was found, the drug has been relegated to deserved oblivion; yet as the outcome of our individual efforts, the medical profession now has such valued remedies as: Cascara sagrada, Grindelia robusta, Jaborandi, Coca, Jamaica dogwood, Black haw, Berberis aquifolium, Cheken, Pichi, and others.

Basing our claims to the consideration of the physician and pharmacist upon the foregoing statements, an investigation of the truth of which we earnestly solicit, we remain,

Yours very truly,

PARKE, DAVIS & COMPANY.

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HERAPEUTIC NOTES.

I. DETROIT, MICH., FEBRUARY, 1894. No. 1.

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PUBLISHED BY

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DETROIT, MICH.

Contributions.

HERAPEUTICS OF COD-LIVER OIL.

BY DR. G. ARCHIE STOCKWELL.

[Written expressly for THERAPEUTIC NOTES.]

od-liver oil has long enjoyed an unexed reputation in the treatment of wasting eases.

Prior to the heralding of its value by Doc- J. H. Bennett in 1841, it had long been commended for the treatment of scrofulous d rheumatic diseases; indeed, it had been troduced to the medical profession by Doc- r Percival as early as 1771 as a remedy for ronic lithiasis, and was employed in the lanchester Infirmary for this purpose for a umber of years.

Doctor Bennett regarded it as a stimulant to e lymphatic glands and vessels, increasing the activity of the capillary system; "by its action on the former the process of assimilation is facilitated and the appetite increased —the quality of the blood is thus improved, and the different organs of the body become better nourished and receive more *turgor vitalis*."

Doctor T. Thompson claimed that thereby the blood is greatly enriched, as its red corpuscles are increased. He adds: "While taking, patients often gain an almost incredible increase of weight, exceeding many times the amount of oil which has been ingested."

In 1849 De Jongh advanced the theory that benefit does not depend solely upon the iodine, the phosphorus, the biliary matters or the fat contained, but on the admixture of these ingredients.

In scrofulous or tubercular diathesis, and in the various diseases in which this state of the constitution manifests itself, cod-liver oil is then the remedy from which we may, as a general rule, anticipate the greatest amount of good. In scrofulous diseases of the skin, too, the most salutary effects are often produced, and although the oil is not capable of relieving the local disease, it places the constitution in the best condition for receiving benefit from other remedies. In scrofulous affections of the joints and bones it is a remedy on which reliance may be placed; under its use the discharge from scrofulous abscesses often speedily improves, diminishes in quantity, and finally disappears; the same is equally true concerning scrofulous ozæna, otorrhœa, and ophthalmia. In all, however, the remedy, to be effectual, requires to be persevered in, and a good hygienic system pursued.

In phthisis no remedy obtains greater confidence, and its efficacy appears to be established beyond doubt, but the earlier in the disease it is had recourse to the greater are the chances of success. Although it may admit of a question whether it is capable of *curing* tuberculosis, it appears certain that, under its use, life may be considerably prolonged and a greater amount of health enjoyed.

The late Doctor C. J. B. Williams furnished the following useful hints for administration in this disease:

The best time for administering is immediately after or before a solid meal.

In cases of peculiar weakness of the stomach with tendency to retching or vomit-

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ing, strychnine proves a most valuable adjunct, as also does salicin. Neither of these, though a powerful tonic, has any of the heating properties of quinine or iron, and if the bitter taste is objected to they may be given in the form of a pill after or before the oil.

It may be advantageously combined with mineral acids—nitric is best in inflammatory cases and those attended with much lithic deposit in the urine, though its tendency to injure the teeth is an objection to continued use; sulphuric is more eligible when there is liability to hæmoptysis, profuse sweats or diarrhœa; but in most cases, where long continuance is desired, the diluted phosphoric acid is preferable.

The bulk of the whole dose of the oil and vehicle should be so small that it may be swallowed at a single draught; the dose should rarely exceed a tablespoonful twice or thrice daily, as larger quantities either derange the stomach or liver, or some of the oil passes unabsorbed by the bowels.

The diet requires attention—with some persons the oil agrees so well, and so much improves their digestive powers, that they require few or no restrictions, but this is not the case with the majority; the richness of the oil proves more or less a trial sooner or later to most, therefore it is proper to omit or reduce all other rich and greasy articles of food, and sweets; even new milk in any quantity is not generally well borne, and many find malt liquors too heavy, increasing the tendency to biliousness. A plain nutritious diet — bread, fresh meat, poultry, game, with a fair proportion of vegetables, a little fruit, and only a moderate quantity of liquor at the earlier meals—commonly agrees best.

Should a bilious attack come on, it is necessary to suspend the oil, lighten the diet, and give a mercurial, with an aperient on alternate nights, and an effervescing saline twice or thrice during the day. Later, when the attack has passed off, the oil may be resumed, beginning with small doses as at first. In all cases during its use the bowels should be regular in action, and if this cannot be secured by regularity of habit and diet, the daily use of a mild aperient pill should be resorted to.

In tabes mesenterica, cod-liver oil has been employed to great advantage. Under its use the patient rapidly gains strength and flesh, the appetite returns, the tumefied abdomen becomes reduced, and perseverance is usually followed by mitigation or removal of all symptoms; the stools lose their clayey color and become bilious and healthy. Doctor Bennett observes that in no disease, with the exception of rachitis, are the good effects of the oil so well established and often striking. It should not only be given internally, but employed by unction to the abdomen. M. Trousseau corroborates, remarking improvement is generally manifest at the end of eight or ten days, and relief effected in from six to eight weeks. Doctor Hillier classes it, in connection with iron, as the most useful drug in this disease; and he likewise recommends it in the chronic hydrocephalus of the scrofulous, and in chorea associated with cachexia, in which he is borne out by Doctor Radcliffe. The latter, however, generally gave it in conjunction with the hypophosphites, sometimes associating camphor or carbonate of ammonia.

Doctor Anstie speaks most encouragingly of cod-liver oil in epilepsy, but insists it requires to be persevered in for a long time. Cases of chorea, paralysis agitans, and mercurial tremors, are also reported by the same author as being relieved—in all, cod-liver oil appeared to him "more constantly useful than any other medicine."

Many forms of neuralgia which resist quinine and other remedies, will sometimes yield to the plentiful ingestion of fat as an article of diet; and of the fats, cod-liver oil is accorded highest rank and, when it does not immediately disagree with the stomach, is the best fat that can be employed. Doctor Durant cites several cases of neuralgia which yielded to cod-liver oil, but remarks "its *modus operandi* is obscure."

Other diseases in which cod-liver oil has been highly recommended by various authors are: Rheumatic ophthalmia; atrophy, whether connected with 'rheumatism or scrofula, or malassimilation of food; jail cachexia; laryngismus stridulus; whooping and other spasmodic coughs, supervening on bronchitis, in weakly children; anæmia from whatever cause; obstinate constipation of infants; diabetes, and; in many non-scrofulous diseases of the skin, such as eczema, lepra, psoriasis, ringworm, pemphigus, prurigo, and lupus

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CHEMISTRY OF COD-LIVER OIL.

BY PROF. JOHN M. FRANCIS.

[Written expressly for THERAPEUTIC NOTES.]

From the standpoint of the chemist, cod-liver oil is a very interesting substance. In composition as well as in many characteristics it closely resembles other members of the great class of fatty or oily substances produced in such abundance by both animals and vegetables.

These fatty bodies are what chemists term *ethereal salts;* that is to say, they are combinations of the well known alcoholic substance glycerin with certain organic acids. The products of this combination are more or less stable compounds, presenting new properties entirely different from those of the original substances. According as the acid happens to be stearic, oleic, palmitic, linoleic, etc., or as certain of these predominate, the characteristic physical properties of the oil are determined, as also its fitness as a food, or as a lubricating or drying oil. The oil under consideration consists mainly of glycerin combined with oleic acid, but also with smaller and varying quantities of myristic, palmitic, and stearic acids. This is the *chemically* pure cod-liver oil.

If this oil had only these three or four constituents above named, it would probably be no better as a *medicinal* food than palm oil or butter; as derived from the fish livers, however, it contains also minute quantities of iodine, bromine, and phosphorus, which, derived from the fishes' food and in transit through the liver at the time of capture, consequently find their way into the oil. There is also a certain amount of cholesterin and other *bile salts* which serve to render the oil readily emulsifiable when taken into the stomach and hence play a very important rôle.

Up to this point we have a theoretically perfect oil from a medicinal point of view; but unfortunately the oil contains some objectionable constituents, and these vary in number and amount according to the method by which the oil is extracted. First, we have a certain amount of albuminous substance which adds sulphur and nitrogen, and as albumen is very prone to decomposition it sets up a fermentation which produces butyric and other volatile acids of objectionable smell and taste; of course this fermentative process is carried on at the expense of the desirable constituents. Such oils smell rank and fishy, have an acid reaction, cause that peculiar disagreeable after-taste, and tend to derange the digestion.

In case the livers are not properly cleansed, or are allowed to stand some time before extraction, a decomposition or fermentation sets in with a partial destruction of the tissues, and there are formed certain substances which are similar to the dangerous compounds sometimes found in poisonous ice-cream and spoiled cheese. To these bodies chemists have given the name of *ptomaines;* they are very active and most of them are very poisonous. The ptomaines found in cod-liver oil have been named morrhuine, aselline, dihydrotoluidine, amyl-amine, butyl-amine, etc.

It may be proper in this connection to call attention to the fact that at the present time there are being urged on the public several so-called "tasteless" cod-liver oils, "wines of cod-liver oil," etc., which consist of an alcoholic solution of these very ptomaines or decomposition products, made palatable by combination with wine, peptones, iron, flavoring extracts, etc., and whose proprietors glibly state that in their manufacture the "active, medicinal constituents" are extracted, the more or less unpleasant oil being left behind. The fallacy of *extracting* the medicinal agents or active principles of cod-liver oil must be apparent to any sensible person, because in a commercially pure oil the medicinal action lies in the oil itself, and not in any of these above-noted adventitious compounds, which are really decomposition products. The one merit attaching to such a practice is that it affords a profitable market for oils otherwise fit only for industrial uses on account of their offensiveness.

That these ptomaine-like bodies are adventitious, is proved by the fact that they are not found in the fine, limpid, light-colored oil which is produced by the best and most painstaking methods of expression: in such oil, too, the amount of albuminous matter is reduced to a minimum, and the taste and smell are the most agreeable.

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HISTORY OF COD-LIVER OIL.

BY DR. KARL SCHWICKERATH.

[Written expressly for THERAPEUTIC NOTES.]

Cod-liver oil is the liquid fat obtained from the large, light yellow, trilobed livers of the cod-fish—*Gadus Morrhua*, L.—a fish belonging to the species "Gadideæ," and attaining a weight of 80 to 90 pounds. The cod-fish lives in the deepest parts of the Atlantic Ocean, from the 40th to the 70th degree of northern latitude. At spawning time they begin a great migration and appear in immense shoals at different points near the shores of Europe and North America. At this season the fishes are caught in very large quantities and their livers used for the manufacture of cod-liver oil.

The capture of these fishes on its most extensive scale takes place on the *Loffoden or Lofoten Islands*. These islands are situated near the northern extremity of Norway. Between the islands and the continent there is a sheltered bay, the so-called *Westfjord*, which is the most important scene of the Norwegian cod-fisheries.

The first migration of the fish usually begins early in the month of January, but their very great masses or shoals do not appear before the middle of this month. The great fishing commences toward the end of January, and terminates in April. The number of fish annually caught is estimated at more than sixty millions.

Immediately on the appearance of the immense shoals of cod at Lofoten, all other kinds of fish disappear with one accord. The consequence is that no fish other than cod can be seized in the nets; hence there is no danger of employing other livers than those of the cod in the preparation of the oil. The Lofoten Islands are the only place in the world where the cod-fish—the true Gadus Morrhua—is found in immense shoals absolutely alone, and it is beyond all doubt or suspicion that the produce of the Lofoten fisheries is a true cod-liver oil.

But there is yet another reason why the Lofoten Norwegian cod-liver oil has taken precedence over every other—as, for instance, that obtained at Newfoundland. The cod is a migrating fish, arriving from the deep sea on the Norwegian coast early in January, reaching Newfoundland at the end of June, and departing in October. They reach Lofoten in their finest and best condition; after spawning they leave thin and emaciated, and so arrive at Newfoundland. For this reason also the Lofoten cod-fish bring a much higher price in the market than those collected at any other point.

Until later years—and in many places even at the present time—the cod-liver oil of commerce was obtained by the crude process of fermentation or putrefaction: the livers with the gall-bladders being thrown into barrels and abandoned to themselves. Day by day the livers produced by the day's fishing are put into a barrel until it is quite full; it is then properly covered or bunged, and a new barrel begun. When the fishing is ended, each fisherman takes the number of barrels belonging to him and journeys homeward. On arriving at the different villages, the preparation of the oil is proceeded with, and generally completed by the end of May. During this time, and inasmuch as the capturing of the fish at Lofoten lasts for some months, decomposition is constantly proceeding and imparts to the oil an unpleasant, penetrating smell and a repulsive taste. The oil thus obtained is also of a darker color.

Later years have introduced a superior method of preparing the oil by steam. Soon after the capture, the selected livers are taken, the gall-bladders being removed, and washed with clean water to remove blood and other impurities. They are then introduced into iron kettles, which are externally heated by steam until the mass reaches the temperature of 60° to 70° C. This procedure causes the cells to burst, the oil flows out, and the separated oil is withdrawn as fast as possible. By exposure to cold the stearine is precipitated, whereupon the oil is filtered. After the filtration the oil is put into barrels and placed on the market.

At the present time the finest quality of oil is obtained by trying out the livers by steam directly on board vessels especially fitted for the purpose, which attend the fishermen. Owing to the fact that the livers by this improved method are immediately utilized, hence are perfectly fresh, selected, and scrupulously clean, the pollution of the oil by products of decomposition is completely

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eliminated. A Lofoten Norwegian cod-liver oil obtained in such a way is nearly tasteless and odorless, and the many disagreeable effects which in former times followed the use of cod-liver oil are almost entirely avoided.

PHARMACY OF COD-LIVER OIL.

BY L. C. FINK.

In the good old days when cod-liver oil was taken without any thought of possible palatability, the product generally offered in the market was repulsive stuff, possessing a pronounced odor of sole-leather and a rank fishy taste. To render the oil more palatable and, incidentally, more readily assimilable, emulsification was resorted to, and the oil is now almost invariably exhibited in the form of an emulsion, although physicians are aware that the intervening emulsifying agent is a burden to the weakened digestive organs of an invalid.

Now that the novelty has worn off, we are prepared to question whether or not the subdivision of the oil by emulsification really facilitates absorption, inasmuch as it seems most probable that the sugar and emulsifying medium will be separated in the stomach, and the oil accumulate in large globules before reaching the duodenum, where by aid of the pancreatic ferments it is prepared for absorption.

From this it would appear that palatability is the chief advantage possessed by emulsions, and now that LOFOTEN COD-LIVER OIL has been rendered so palatable there seems to be little occasion to administer mixtures containing acacia, which is itself a calcium salt and has no place among foods.

Last, but not least, is the question of permanency. It is a well known fact that cod-liver oil grows rancid more rapidly in contact with sweetened water, which constitutes the base of nearly all emulsions, than when preserved pure in closed vessels. LOFOTEN COD-LIVER OIL is prepared with a special view to permanency.

The Suit of the Carl L. Jensen Co. against our firm, for alleged infringement of pepsin patent, has been dismissed as baseless, all costs falling to complainants. The testimony proved that their pepsin possessed less than a third the potency of our own, hence there could be no infringement. The suit was manifestly begun for advertising purposes, without the faintest hope of a verdict.

Editorial.

THE REASON OF OUR BEING.

THERAPEUTIC NOTES represents by no means our first message to the medical profession. The introduction of various medicinal plants from foreign habitats; the general advance of pharmaceutical science, which has added to the resources of the practitioner in his contest with disease; the presentation of valuable specialties and apparatus—have all been the occasion for our offering impartial, scientific reports to medical men, in the form of Working Bulletins.*

It is as needless as it would be unfitting for us to dwell boastfully on the popularity and merit of these Bulletins: their best commendation is the enormous number of physicians who have welcomed the information which they alone embodied, and the widespread favor accorded the remedies of which they treated.

Despite the advantages of these Working Bulletins, we were not slow to perceive the need of some medium which should present with all possible brevity and terseness our occasional messages to the profession *à propos* of valuable drugs and preparations. Such a medium, we fondly hope, THERAPEUTIC NOTES will prove to be. The little journal will be distributed without charge to all who find it worthy of solicitation, and will offer a fund of short, interesting and impartial articles on the special themes to which the individual numbers may be dedicated.

Such is the reason for the being of this journal. Pray, then, favor its first appearance with a nod of friendly welcome, and reserve for its future visits (for the regularity of which we can yet make no pledge) some measure of the favor which the medical profession have so generously extended to our house and its preparations in the past. To see to it that such good-will is not ill-bestowed will be our unremitting endeavor.

PARKE, DAVIS & Co.

* Working Bulletins for the Collective Investigation of New Remedies. Special bulletins mailed free on application.

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AN OLD FRIEND IN A NEW GARB.

The great importance accredited with singular unanimity to cod-liver oil, by practitioners of every nationality and clime, renders superfluous any apology for our devoting so large a fraction of our space to its history, chemistry, therapeutics, and pharmacy. We invite the special attention of the reader to these brief and practical articles, and we may assert with little fear of contradiction that an examination of the subject will give him for all time the conviction that unless the pure, fresh oil can be made acceptable to the consumer, *without discarding any of its constituents*, physicians may as well renounce its use as misleading and delusive.

In other words, no "extracted principles," no medicinal wines containing "all the active agents," no emulsion laden with inert and useless mucilage, no saponification parading in the guise of an emulsion, will render the service which the pure oil can be made to yield in all the vast category of wasting diseases and impaired nutrition.

The attempts to secure some "concentrated" or "extracted" representative of cod-liver oil have been legion. With what success? Simply to arouse the derision of physiologists, to disappoint the physician, and to swell the long list of therapeutic failures. The oil—the entire oil—is the last word of science on this subject.

Mindful of these mistaken endeavors, we now offer the medical profession a pure, fresh product of Norwegian oil, from which no constituent has been discarded, and which owes its bland and palatable savor, not to the sacrifice of *any essential component*, but solely to innocent admixtures and skilled manipulation.

This product, we repeat, is fresh and pure. We guarantee it to possess every virtue ascribed by science to cod-liver oil: we invite you to test it in comparison with any preparation heretofore employed; and we cheerfully await exhaustive trial, confident of the result.

Our "IMPROVED LOFOTEN COD-LIVER OIL" represents the first attempt of any pharmaceutical manufacturer to exhibit a palatable form of this remedy and nutrient in its integrity: the serious objection of nauseating taste and almost certain rancidity is here overcome, and the preparation may be prescribed without misgivings as to the result.

THE LETTER OF THE LAW—SEQUEL OF A CELEBRATED CASE.

It would not seem that the atmosphere of New Jersey has proved very congenial to scientific progress or to business enterprise, if we may judge from the following account of an ill-advised prosecution, as published in the *Bulletin of Pharmacy*. Expense, annoyance, and misrepresentation are hardly a fitting reward for anticipating by fully ten years the recent action of the Pharmacopœia Commission in fixing a definite alkaloidal standard for certain important preparations:

Rarely is such a measure of interest accorded a legal process by the pharmaceutical and medical world as was aroused some two and a half years ago by the famous Nux Vomica suits in the Atlantic Court of Common Pleas, New Jersey. A brief review of those proceedings and of the curious solution which time has recently effected in the legal complications, will not be devoid of profit.

The plaintiff in both these cases was George W. McGuire, State Dairy Commissioner for New Jersey, and criminal action was brought by him against the two defendants* on the charge that each had sold a quantity of tincture nux vomica which upon examination was found to contain less than two per cent. of dry extractive. The basis of the prosecution was an existing New Jersey statute, which enacted that any preparation shall be deemed to be adulterated if (when sold under or by a name recognized in the U. S. Pharmacopœia) it "differs from the standard of strength, quality, or purity laid down therein." And 2 per cent. extractive, as stated, was the standard of the U. S. P. at that time.

The evidence introduced developed the fact that the tincture had been prepared from normal liquid nux vomica, Parke, Davis & Co.; the plaintiff's witness testified that it contained 0.712 per cent. of dry extractive;

* The defendants were Harry B. Leeds and Albert D. Cuskaden, druggists, and the expenses of the defense were borne by Parke, Davis & Co.

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and upon this the prosecution rested its charge of adulteration within the meaning of the statute, no attempt being made to establish the therapeutic inferiority of the disputed preparation, or any deficiency in the needful content of the all-important alkaloids.

Seldom has such an array of learned talent or such a wealth of distinguished evidence been brought forward in defense of any cause involving a pharmaceutical question, as was now adduced by the respective defendants in sustaining their position. Professors Remington, Hare, Rusby, Ryan, Marshall, Eccles, and the lamented Professor Bedford, all went upon the stand and declared with one voice that the active constituents of nux vomica are its two alkaloids, strychnine and brucine, alone; that the quantity of dry extractive forms no standard of strength, quality, or purity, and may, indeed, be completely inert —without medicinal property or physiological action; that tinctures of nux vomica made, as was the one in question, from the normal liquid, are far more reliable than the tinctures on the market produced in exact accordance with the U. S. P. formula, since the former are of uniform alkaloidal strength, and the latter subject to extreme variations of medicinal potency; that the U. S. P. standard could easily be evaded by the addition of sufficient glucose to any inferior tincture; and finally, that the Pharmacopœia of 1880 really offered no means of determining the "strength, quality, or purity" of the tincture to which the name standard could with any propriety be applied, hence was virtually devoid of such standard.

All for naught. Here the gods themselves would have contended in vain. Conceding the entire probity of the defendants, and the full medicinal value of their tinctures prepared from the normal liquid of nux vomica, Judge Reed, nevertheless, decided in the first case that such tinctures were adulterations within the meaning of the New Jersey statute, since the requirement of 2 per cent. dry extractive was not fulfilled! In the second case, some misgivings must have begun to assail the judicial intellect, since the case still hangs suspended in the limbo of the undecided.

But if the Judge showed an undue tenacity in clinging to an obsolete standard, and a disposition to apply the narrow letter of the law, our Pharmacopœia Commission have taken a very different view of the question. In the revised edition (1890) we are happy to observe a radical change in the requirement made of Tincture Nux Vomica: it is no longer 2 per cent. of extractive, but rather 0.3 per cent. of total alkaloids—the identical alkaloidal content which the manufacturers of the normal liquid had long adopted as their own standard for the tincture. The new Pharmacopœia became a part of the New Jersey law on Jan. 1, 1894, thus depriving the cases of all legal basis.

While we may now smile at the emphatic way in which time has rejected the decision of the New Jersey court, it is obvious that its very absurdity from a medical and pharmacal point of view was not without a compensating benefit in promoting the adoption of a rational standard for this and a few other important preparations in the new Pharmacopœia. Inasmuch as five of the witnesses for the defendants were likewise members of the Revision Committee, the agitation imparted to the question of standardization by the nux vomica cases was unquestionably an active agent in the pharmacopœial changes thus far introduced—changes which, it is to be hoped, will be multiplied until every potent official remedy shall be provided with a standard which will guarantee a uniform medicinal action.

The introducers of normal liquids may well feel content with the handsome vindication which their enterprise has received at the hands of the Pharmacopœia Commission, and with the high compliment embodied in the recent adoption of their well-known standard for the official tincture.

THE WISDOM OF SPECIFYING.

Only the layman or the novice may hug the delusion that a physician's life is a bed of roses. Numberless are his perplexities, difficulties, uncertainties; and the getting of practice is hardly less harassing than the obstacles constantly interposed between the giving and the executing of the doctor's advice.

The stupidity of attendants, the patient's partial compliance with instructions, indi-

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vidual and temperamental idiosyncrasies, the shifting, subtle elements of diagnosis, possible error in the doctor's own treatment, all render his office uncertain and trying to the last degree. If to this formidable list be added the possible substitution (by such druggists as have not at heart the best interests of their profession) of inferior, unreliable imitations of standard galenicals, adroitly marketed on account of greater profit, the situation becomes almost insufferable, demanding in some instances, indeed, a degree of courage to prescribe which fairly amounts to temerity.

In combating disease—a foe in great measure unseen—what folly to leave in doubt the quality or potency of the ammunition! The struggle with human ailment is at best arduous, harassing, dubious—why, then, reduce the chances of success by permitting anyone to place in your hand an untrustworthy weapon?

Specify distinctly the name and brand of your remedies, and fulfill the duty which you owe yourself and your patient, by expressing a lively disapproval of all cheap, unworthy imitations.

THE GREAT ADVANCE IN PEPSIN-MAKING.

The foreman of our Digestive Ferment Department is fond of dwelling on the wonder aroused by his first modest achievement in the manufacture of pepsin some seventeen years ago, ere there was any prospect of surpassing Scheffer's remarkable results.

The art of pepsin-making has since progressed rapidly; yet, the announcement of our PEPSINUM PURUM IN LAMELLIS was received by an astonished and incredulous world, especially when we made the confident assertion of its solubility, permanence, and freedom from decomposing mucus. But repose was not yet in store for the pepsin-maker. Progress has been unremitting; and we are now prepared to offer any strength of pure, permanent, soluble and beautiful pepsin, from a strength of 1:1000 to our most potent product—that which is capable of dissolving 15,000 times its own weight of egg-albumen! Indeed, we have repeatedly produced a pepsin in our laboratory possessing an unmistakable digestive power of 1:25,000.

Can a more astounding progress be cited in any other modern art? Verily, "the world do move."

Gleanings.

In sounding for stone in the bladder, that organ should not be emptied, but be full.

A writer in the *Lancet* claims to have relieved cases of obstinate tympanites instantly by placing the patient in the knee-chest position.

According to Prof. Hare, chloral* and the bromide of potassium* are the best drugs that can be administered during an attack of tetanus.

Sulphate of copper administered at bedtime in five-milligramme doses affords relief from the cramps peculiar to pregnant women. —*La Gazette Médicale.*

Doctor Polak advises rest in bed, morphine or opium per rectum, and drachm doses of fluid extract *Viburnum prunifolium*, as preventive of abortion and miscarriage.

Urticaria, a disease attended by the generation of an excessive amount of acid in the alimentary tube, is almost unfailingly cured by ten drops of nitro-muriatic acid in a wineglassful of water one hour before eating.

Diabetes mellitus has been successfully treated by the administration three times daily of one-twentieth grain of chloride of gold and sodium.—*Medical World.*

We offer this double salt in the form of our Pill No. 759, Gold and Sodium Chloride, $\frac{1}{20}$ grain.

For inflammatory chest trouble, with dry, hot skin, or where there is pain in the thorax, localized, sharp, acute or subacute, with increased inspiration, *Asclepias tuberosa* often acts like magic.

We manufacture a fluid extract of the *A. tuberosa* or pleurisy root, a Concentration *Asclepidin*, and offer the herb pressed in ounce packages.

In the treatment of typhoid fever Doctor Drake reports a special success from the employment of *Baptisia tinctoria.* Ten drops are administered every twenty-four hours until convalescence is established.

This drug is represented on our list by the Fluid Extract *B. Tinctoria*, No. 507; by the Concentration *Baptisin*, and the Tablet Triturate 206, each containing one minim of Tincture Baptisia. The drug is also offered in the form of pressed herb.

*See alphabetical list of pharmaceutical preparations, third page of cover.

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Amenorrhœa. — The *Eureka Springs Medical Journal* declares that "two-grain pills of permanganate of potash" (Parke, Davis & Co.'s preferred), three or four times daily, are a most efficient remedy for this disorder.

Ovarian Neuralgia.—

Normal liquid digitalis, 18 minims.
Normal liquid gelsemium, 15 minims.
Sodium bromide, 240 grains.
Water, 6 ounces.

Dose: Tablespoonful every three hours.

Threatened Abortion.—In threatened abortion, and in amenorrhœa, there is no remedy so satisfactory as Liquor Sedans. When Liquor Sedans and saw-palmetto are combined in respective proportions of three and one, the results obtained in dysmenorrhœa are magical.

Dr. Davis is of the opinion that acute infectious diseases are generally unfavorably influenced by any effort to bring the pregnancy to an end. On the other hand, the induction of labor in many chronic cases gives the patient a great amount of relief.—*College and Clinical Record.*

Liquor Sedans in Amenorrhœa and Chlorosis.—This condition, so common in school girls and teachers, is due largely to nervous exhaustion, and, where iron fails to relieve, the nervines and uterine tonics contained in Liquor Sedans often prove signally effective.—*New Zealand Medical Journal.*

Complete information sent on request.

In irregular heart action from any cause except increased tonicity, and in weakness of heart's action with irregularity or intermittency due to nervous causes, *Cactus grandiflorus* acts charmingly. It will likewise produce sedation in fevers where the pulse is rapid from prostration.—*Medical Summary.*

We list a fluid extract of this drug under No. 126, as *Cereus Grandiflorus.*

Damiana is a general tonic—a true nutrient gland tonic. It is a restorative of superior power, and there can be no question in the minds of those who have made use of it in wasting diseases such as consumption, scrofula, chlorosis, neurasthenia, etc. Its stimulating influence on the organs of generation is well known; it promotes healthy nutrition, stimulates vitality, imparts energy, and overcomes those factors tending toward waste and death.*

*See alphabetical list of pharmaceutical preparations, third page of cover.

The importance of estimating the diastatic activity of malt extracts is not sufficiently weighed by those who prescribe these preparations. And the omission is all the more singular in view of the ease with which the starch-converting properties of malt extract may be experimentally determined. There is no reason why the substantial nutritive value of these preparations should not be accompanied and reinforced by a high degree of diastatic power.

A full measure of diastatic activity will be found on actual test to reside in our entire line of superior malt extracts. We offer all the popular combinations—with cascara sagrada; cod-liver oil; pepsin; yerba santa; iron, quinine, and strychnine; the hypophosphites; and beef-peptone. Literature promptly supplied on request.

Chloroform is recommended in a New York journal as one of the best remedies for the controlling of external hæmorrhage, whether arterial, venous, or capillary. It may be applied with lint or cotton.

Normal Liquids.—The sworn testimony of Professors Remington, Hare, Rusby, Ryan, Marshall, Eccles, and Bedford, in a prosecution which will go down in history as a legal curiosity (see page 6—"Letter of the Law"), attesting the desirability of using our Normal Liquid Nux Vomica for the preparation of the official tincture, is the highest endorsement that we could wish for one of a line of modern galenicals which in unswerving uniformity, precision, and activity represent the latest fruits of progress in pharmacy. At each stage of their manipulation, NORMAL LIQUIDS are regulated by accurate assay and adjusted to the standard of strength stated on the label. Thus, fluctuations of medicinal potency, otherwise inevitable, are *absolutely excluded* in the finished preparations, and they represent the same definite power as chemical elements. The great importance of such uniformity in preparations of powerful and toxic drugs needs no emphasis.

Dr. Joseph Adolphus states, as the result of prolonged personal trial: "I have always had a strong penchant towards the *Normal Liquids*, because I have learned by long experience that they can always be relied upon with deliberate confidence, and find them, in point of fact, the very perfection of pharmaceutical art and science."

Literature bearing on the exact standards adopted by us for the respective drugs, and on the great utility and precision of NORMAL LIQUIDS, will be sent to any physician desiring to pursue further this important subject.

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If gonorrhœa in a female involve the vulva, Prof. Horwitz recommends that she be kept perfectly quiet, that the parts be washed with a solution of boracic acid, then dusted with an antiseptic powder consisting of calomel and bismuth; and a piece of cotton is to be kept between the labia.

Therapeutic Value of Black Sampson.—In the July number of the *Veterinary Journal* (London) it is stated that fluid extract *Echinacea angustifolia*, made from the root of the plant, is successfully employed in diphtheria, cholera infantum, and ulcerations of the mucous membrane generally; also for rhus poisoning and for healing abscesses or other pus cavities. Furthermore it is a most valuable accessory agent in the treatment of syphilis. It may be advantageously applied externally to aid internal administration.

We manufacture Fluid Extract Echinacea, quoted in our list of fluid extracts, under No. 187.

Therapeutic Value of Thyroid.—Great therapeutic power has been demonstrated for preparations of the thyroid gland in the treatment of a certain group of disorders associated with diseases of the thyroid gland, viz.: myxœdema, cretinism, and cachexia strumipriva; and more recently it has been said to be of use in the treatment of scaly diseases of the skin. It has proved of service in a few cases for the temporary relief of symptoms of exophthalmic goitre and other forms of vaso-motor ataxia, in diabetes mellitus, and in acromegaly.—*S. Solis-Cohen.*

"Thyroids, desiccated, powdered," in ounce vials, are quoted in Part II of our list.

Esencia de Coca.—Coca has maintained its reputation as a powerful nerve-stimulant, being used with good results in nervous debility and the opium and alcohol habits. The highly variable character of the commercial drug makes it, however, uncertain as to activity. The Esencia de Coca is a uniformly active article, prepared from assayed leaves, the percentage of cocaine being always determined. This preparation has of late obtained unusual reputation in the convalescent treatment of dysentery, diphtheria, typhoid, and other diseases in which there is lack of assimilative digestive power. Particularly effective is its action in stimulating and restoring gastro-duodenal digestion.—*Lancet.*

Esencia de Coca was first placed on the market by the Mosquera-Julia Food Co. We have the exclusive agency for the sale of this product.

Cascara Sagrada.—Dr. Reid, in a paper read before the British Medical Association, and published in the *British Medical Journal*, giving an analysis of thirty-three cases of habitual constipation treated with cascara sagrada, states, as one of five conclusions, that when pain was produced by its exhibition it was owing to the administration of too large a dose. In view of the claim of some manufacturers that "our preparation does not gripe," this conclusion of Dr. Reid's is of interest, since such griping indicates to the physician that *his dosage is too large;* and if he is exhibiting the same dose of a griping preparation as he has been accustomed to use of another which does not gripe, the former is more efficient and requires the use of a diminished dose. *Per contra*, the non-griping product may owe its freedom from such unpleasant effect to its very inertness. To obviate all uncertainty or misgiving in this respect, we strongly recommend the use of the regular Fluid Extract Cascara Sagrada—the form in which we originally introduced the drug, and to the excellence of which it owes no small measure of its reputation.

Our Fluid Cascara Aromatic is a very pleasant preparation, manufactured, in common with all our cascara preparations, from drug which has been stored two years; is uniform and reliable in laxative action; may be administered in moderate doses, and affords a good means in an inviting form of curing habitual constipation.

Night-blooming Cereus.—*Cactus grandiflorus* has been found useful in functional heart disorders, relieving palpitation and nervousness. It seems to act chiefly on the accelerators and sympathetic ganglia, shortening diastole and stimulating the special vaso-motor system. — *Watson, in Medical Record.*

Pichi.—Doctor M. Friedländer uses this remedy in teaspoonful doses of the fluid extract, thrice daily, either clear or with a little sugar. "The taste is not disagreeable, nor does it give rise to digestive or renal disturbances, or eruptions, as does balsam of copaiba or oil of sandalwood." He has employed it for cystitis, prostatitis, neuroses, acute gonorrhœa, and epididymitis, and has found it to be especially useful in conditions of marked purulent discharge, as gonorrhœa and cystitis. —*Therapeutische Monatshefte—Journal of the Medical Sciences.**

*See alphabetical list of pharmaceutical preparations, third page of cover.

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Eucalyptus and Thymol Antiseptic.—This is a preparation containing borate of soda, benzoic acid, boric acid, thymol, oil of eucalyptus, oil of wintergreen, oil of thyme, oil of peppermint, and fluid extract of wild indigo. It may be used externally or internally. It is a non-coagulator of egg albumen. It may be freely used as a mouth-wash, root-dressing, general detergent, for cleaning the hands, and wherever a good antiseptic is desired. It may be used freely about the mouth, as it is non-poisonous, non-irritating, and non-injurious to tooth substance. Dentists find it especially valuable; and Dr. Edwin Le Fevre (*Cincinnati Lancet-Clinic*) employs it in the preparation of the arm for the reception of the vaccine virus.—*British Journal of Dentistry.*

Send for literature on this subject.

Therapeutics of Asthma.—Dr. J. C. Smith has the utmost faith in creasote* in the bronchitis connected with tuberculosis; has had equally excellent results in asthma. He has also employed quebracho* extensively and satisfactorily in the same disease, but its taste is objectionable; it relaxes the muscular fibres, and is a true respiratory stimulant like strychnia. In dry bronchitis where the paroxysms come on without disturbance of digestion he has had some success with euphorbia, and also a number of failures.

In the intervals of attacks of asthma, best results were obtained by the use of acid hydriodic (2 per cent.),* better even than from iodide of potassium; the acid, moreover, proved most beneficial in cases associated with dry bronchitis or where the secretion was exceedingly tenacious.

Yerba Santa possesses astringent, demulcent, tonic, and balsamic properties, and is the most direct restorative drug in diseases of the respiratory organs that we possess.

This valuable remedy was introduced by our effort in 1876, and is offered the profession in the form of the fluid extract; dose, ¼ to 1 fluidrachm (1 to 4 Cc.).

Yerba santa completely disguises the taste of quinine sulphate, and to utilize this valuable property as a vehicle we have devised our *Syrup Yerba Santa, aromatic*, one teaspoonful of which masks the taste of 5 grains of the quinine salt.

As sponsors for this drug we take no little pride in its recent admission to the Pharmacopœia in the form of Extr. Fluid. Eriodictyon.

*See alphabetical list of pharmaceutical preparations, third page of cover.

Diurnules and Diurnal Tablet Triturates afford the physician a ready, trustworthy means of prescribing all the potent alkaloids, without the necessity of memorizing the maximum and minimum doses, or of referring to printed tables. In each instance the maximum daily dose—the extreme limit of safety—is represented by TWELVE Diurnules or Diurnal Tablet Triturates; and the physician may vary the number to be administered at each dose, as also the length of the intervals between doses, in accordance with the needs and temperament of the patient. Thus, a Diurnule or Diurnal Tablet Triturate, given every two hours, for six, twelve, or sixteen hours, represents respectively one-fourth, one-half, and two-thirds of the *extreme* dose.

A full line of these convenient and modern products is offered by us, and their applications are fully set forth in our *Syllabus of Diseases and Remedies*, published in neat form, and furnished on request.

To those who realize the need of stringent mathematical accuracy in the dosage of potent remedies, our Diurnules and Diurnal Tablet Triturates will furnish an ideal form of medication. Full descriptive literature may be obtained on application.

Prof. Huxley on Sir Andrew Clark.—"Thoughtless people blame Sir Andrew Clark for not leaving off work when he had reached wealth, fame, and the official headship of his profession. But though he may have liked these rewards as well as another, my friend did not live for them. His work was his life, and no true friend would have desired for him, of all men, a prolongation of that shadow-life of enforced rest, in which there is no repose."

Chekan.—Dr. Wm. Murrell, of London, very warmly recommends this drug in winter cough, that most annoying affection of elderly people. Dr. Dessaur, of Valparaiso, speaks highly of its effects in the purulent form of bronchitis; and, indeed, it is held to be the most reliable remedy, by a large class of practitioners, in cases of weak bronchial mucous membrane. Dr. Naphey declares it to be "a tonic expectorant with diuretic qualities."

Prompted by the general employment of chekan in Chili (its habitat) in the treatment of bronchial disease, we introduced the drug to the medical profession of America in the spring of 1881. The leaves are used in medicine, and the dose of our fluid extract is 1 to 3 fluidrachms (4–12 Cc.).

We shall be pleased to furnish Working Bulletin on application.

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Cocillana has been tested by Prof. H. H. Rusby, by Reynold W. Wilcox, A.M., M.D., by John V. Shoemaker, A.M., M.D., and by Dr. D. D. Stewart. Its properties are expectorant, tonic, and laxative. Possessing an action on the respiratory organs similar to that of ipecac, it is said to be "superior [to the latter] in certain diseases of the air-passages in which ipecac is often used." Cocillana improves the appetite and reduces the night sweats of chronic bronchitis and phthisis.

Out of the several hundred native remedies directed to the attention of Prof. Rusby during his explorations in South America as our representative, this is the second which he found worthy of introduction to the medical profession. We accordingly were the first to offer a pharmaceutical preparation of cocillana, and now invite a trial of our fluid extract of the bark; dose, 10 to 30 minims (0.6 to 2 Cc.).

"In diseases of the respiratory organs this drug is superior to apomorphine, preferable to ipecacuanha, and safer than pilocarpine" (*Quarterly Therapeutic Review*).

Working Bulletin sent on request.

Therapeutics of Saw Palmetto.—Doctor I. J. M. Goss declares he finds this drug very valuable in cases of indigestion and chronic coughs, including also phthisis pulmonalis—in this latter disease "it acts as a medicine and a food; it seems to counteract irritation of the lungs and sustain the vital powers promptly. It is very positive in its tonic effects upon the digestive apparatus; has a direct affinity for the mucous membrane of the entire digestive and respiratory organs, improving their tone, relieving irritation, and correcting abnormal conditions; and will doubtless prove a good remedy in chronic laryngitis, asthma, ozæna, and chronic pharyngitis. In sexual debility it has no superior; in diseases of the prostate gland it reduces hypertrophy; in inflammation of the mucous lining of the urethra and bladder it acts like sandalwood, copaiba, cubebs, kava kava, etc., and possesses the especial advantage that it does not induce either nausea or oppression of the stomach, but on the contrary improves digestion and assimilation."

According to the *Medical Free Press*, saw-palmetto will increase the size of the mammæ of ordinary healthy women below fifty years of age. In two typical cases, one aged twenty-five, the other forty-two, the increase was pronounced at the end of three months.*

*See alphabetical list of pharmaceutical preparations, third page of cover.

Soluble Elastic Gelatin Capsules.—The general desirability of exhibiting medicine in liquid form may be freely conceded without denying a wide range of utility and solid advantage to another mode of administration, by which all nauseous or unpalatable taste is masked without the slightest sacrifice of solubility or remedial potency. In the soft elastic capsules of gelatin we have a vehicle which completely disguises any disagreeable taste; is most attractive in appearance, easily swallowed, rapidly soluble, and exposes its contents—*in powdered form*—to the immediate action of the gastric mucous membrane.

The soft capsules are of special advantage in the administration of oils. Our capsules of cod-liver oil are of notable service with patients who cannot overcome their repugnance to this agent; and we guarantee them to contain the finest quality of Lofoten cod-liver oil.

Self-Medication.—The baneful practice of self-medication appears to be rather on the increase than on the decline, despite the numerous accidents that have occurred in consequence thereof. . . Nowadays almost every toper is perfectly familiar with chloral hydrate or carries with him a supply of this or that "sedative," "tonic," or "corrective." . . This reckless selling of potent drugs ought certainly to be absolutely stopped at the earliest possible moment.—*Merck's Market Report.*

Kolaczek's Treatment of Erysipelas.—The author has employed the following method for the past ten years, and highly commends it to the profession: Rubber tissue of sufficient size to extend about a hand's breadth beyond the affected area is dipped in a 5-per-cent. solution of carbolic acid and spread smoothly over the erysipelatous patch. A layer of cotton wadding is placed over this, and the whole secured firmly in place by a few turns of a roller bandage. After twenty-four hours this cotton wadding is removed and renewed, a larger piece of rubber tissue being placed over that already in position, if necessary, to cover in any increased area of the disease. The method seems to be strikingly successful in erysipelas of the extremities; less so upon the face and trunk. After several applications all the rubber tissue is removed, large pieces of the epidermis separating at the same time.

In the case of the lower extremities, an erysipelas commencing at the foot and extending to the leg, the affection has been completely arrested by a single application.—*Centralblatt für Chirurgie*, July 15, 1893.

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LIST OF PHARMACEUTICAL PREPARATIONS

Representing in Form Convenient for Administration the Various Remedial Agents Mentioned in the Foregoing "Gleanings."

CHLORAL:

Elixir Chloral, No. 40.

Elixir Chloral and Potassium Bromide, No. 41.

Compressed Tablet Chloral Comp. (Antispasmodic), No. 13.

Chloral, 2½ grs.
Potass. bromide, 2½ grs.
Ext. Cannabis Ind., ¼ gr.
Ext. Hyoscyamus, ½ gr.
Zinc bromide, $\frac{1}{10}$ gr.

Compressed Tablet Chloral, 5 grs., No. 123.

[Our various preparations of potassium bromide are stated in the following, under Potassium.]

CREOSOTE:

Pil. Creosote, ½ gr., No. 782, *enteric coated.*

Pil. Creosote, 1 gr., No. 783, *enteric coated.*

Pil. Creosote, 2 grs., No. 790.

Pil. Creosote, 3 grs., No. 791.

Pil. Creosote, 4 grs., No. 792.

Pil. Creosote, 5 grs., No. 793.

Soft Elastic Capsules of Creosote, No. 83.

Creosote, 1 minim.
Olive oil, 4 minims.

Compressed Tablet Creosote Comp., No. 152.

Creosote, ½ minim.
Cocaine hydrochlorate, $\frac{1}{10}$ gr.
Cerium oxalate, 2 grs.
Pepsin Aseptic, 1:3000, ¼ gr.
Tinct. Nux-vomica, ¼ minim.

DAMIANA:

Fluid Extract Damiana, No. 177.

Solid Extract Damiana, No. 56.

Powdered Extract Damiana, No. 28.

Pil. Damiana Extract, 3 grs., No. 245.

Tablet Triturate, No. 356, containing ½ minim Fl. Ext. Damiana.

Tablet Triturate, No. 357, containing 1 minim Fl. Ext. Damiana.

Elixir Damiana, No. 50, each ounce containing 120 grs. of Damiana.

Elixir Damiana, Iron and Phosphorus, No. 51. Each ounce contains:

Damiana, *true*, 60 grs.
Phosphorus, $\frac{1}{100}$ gr.
Iron pyrophosphate, 8 grs.

Elixir Damiana, Nux-vomica, Iron, and Phosphorus, No. 52. Each ounce contains:

Damiana, *true*, 60 grains.
Phosphorus, $\frac{1}{100}$ gr.
Nux-vomica, 8 grs.
Iron pyrophosphate, 8 grs.

DAMIANA (continued).

Elixir Damiana, Phosphorus and Nux-vomica, No. 53.

Damiana, *true*, 60 grs.
Phosphorus, $\frac{1}{100}$ gr.
Nux-vomica, 8 grs.

Compressed Tablet Damiana Comp., No. 20.

Ext. Damiana, 2 grs.
Phosphorus, $\frac{1}{10}$ gr.
Ext. Nux-vomica, ¼ gr.

Compressed Tablet, No. 154, Damiana Comp., No. 2. (Dr. La Madrid.)

Ext. Damiana, 1⅛ grs.
Strychnine sulphate, $\frac{1}{40}$ gr.
Ext. Indian Cannabis, ¼ gr.
Zinc phosphide, $\frac{1}{10}$ gr.

Compressed Tablet, Aphrodisiac, No. 10.

Ext. Damiana, 2 grs.
Ext. Nux-vomica, ⅛ gr.
Zinc phosphide, $\frac{1}{10}$ gr.
Cantharides, $\frac{1}{15}$ gr.

HYDRIODIC ACID:

Syrup Hydriodic Acid, *one per cent.*

Syrup Hydriodic Acid, *two per cent.*

PICHI:

Fluid Extract Pichi, No. 357.

Solid Extract Pichi, No. 91.

Powdered Extract Pichi, No. 49.

Soft Elastic Capsules of Pichi, No. 82.

Ext. Pichi, 5 grs.
Oil Sweet Almond, q. s. ad 10 minims.

POTASSIUM BROMIDE:

Pil. Potassium bromide, 1 gr., No. 519 (*sugar-coated only*).

Pil. Potassium bromide, 5 grs., No. 520 (*sugar-coated only*).

Pink Granule Potassium bromide, ⅛ gr., No. 705.

Elixir Potassium bromide, No. 107, containing 80 grs. potass. bromide to the ounce.

Compressed Tablet Potassium bromide, 5 grs., No. 78.

QUEBRACHO:

Fluid Extract Quebracho, No. 379.

Solid Extract Quebracho, No. 98.

SAW PALMETTO:

Fluid Extract Saw Palmetto berries, No. 407.

Solid Extract Saw Palmetto berries, No. 131.

Soft Elastic Capsules, No. 88, each capsule representing 30 grs. of the fresh berries.

Soft Elastic Capsules, No. 91, Saw Palmetto and Oil of Santal.

Saw Palmetto berries, fresh, 15 grs.
Oil of Santal, 2 minims.

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A Word on Malt Extract.

The Physician's province is not invaded by the solicitation of lay custom for our malt products.

Our Malt Preparations are Medicinal Products to be dispensed by the Pharmacist as the Physician shall prescribe.

We have devoted much time and study to the subject of digestives and their manufacture, and in introducing to your attention our Malt Extract we do so with the positive knowledge that it is at once *a more active digestive and concentrated nutrient than any similar preparation now on the market.*

The Profession

Is respectfully requested to write for our literature upon malt extract and its combinations, particularly "A Word to the Medical Profession," which forcibly illustrates

"What a Goodly Outside Falsehood Hath."

Half-pound packages as samples to physicians who will indicate their willingness to defray expressage.

MODERN GALENICALS.

Normal Liquids

ARE FLUIDS ADJUSTED BY ASSAY

TO A

DEFINITE STANDARD OF POTENCY

Irrespective of the quantity of crude drug required.

One cubic centimeter of a Normal Liquid represents one gramme of drug of

STANDARD STRENGTH.

Literature promptly mailed upon request.
Samples to Physicians defraying expressage.

PARKE, DAVIS & COMPANY,

DETROIT, NEW YORK, KANSAS CITY, and WALKERVILLE, ONT.

CHEKAN

IN THE TREATMENT OF

WINTER COUGH.

Dr. Murrell, of the Royal Hospital for Diseases of the Chest, London, states as follows:

"Myrtus Chekan I have tested in fifteen cases of chronic bronchitis, all the patients with one exception being men. The age of the woman was 51; the ages of the men ranged from 36 to 58. They were all bad cases, most of them of many years' duration. Many of them had been attended at the hospital for some considerable time, and almost without exception they had in former years undergone much medical treatment with comparatively little benefit. Their occupations exposed them to cold, and wet, and draught, and in some instances they had the additional disadvantage of working in a dusty atmosphere. They complained chiefly of paroxysmal cough, with thick, yellow expectoration, and much shortness of breath on exertion. On physical examination of the chest, emphysema was detected, with or without a little rhonchus of the bases behind. *They were, in fact, ordinary cases of winter-cough.* The fluid extract of Chekan was ordered in two-drachm doses in a little water every four hours, the dose being usually increased at the expiration of a week to half an ounce. The medicine was always taken without difficulty. In all cases the patient obtained some benefit, and in most instances the relief was very marked. There was in a few days a decided improvement in the cough, expectoration was from the first easier and soon diminished in quantity, and finally the dyspnœa was less."

Clinical reports from private and hospital practice promptly forwarded upon request, and samples to physicians who will defray expressage.

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THERAPEUTIC NOTES.

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FLUID

CASCARA SAGRADA AROMATIC.

VILIFICATION.

When we first (in 1877) introduced Cascara Sagrada to the attention of the medical profession, competition, foiled in their efforts to secure with preparations of allied varieties the therapeutic effects of the true *Rhamnus purshiana* properly gathered and cured, attacked us with innuendoes of *sophistication* (putting in aloes, etc.), *mystification* (concealing the botanical name), and other delinquencies, which older physicians and pharmacists will recollect.

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VINDICATION.

But the progressive physicians investigated our preparations of Cascara Sagrada, with the result that to-day the drug is official in the British, the Austrian, and the United States Pharmacopoeias.

☞ The clinical experiments warranting this recognition of Cascara Sagrada were made with preparations offered by ourselves. What position would Cascara Sagrada, now one of the most important of the Materia Medica, have occupied, had we not introduced and defended the drug? Competition now recognize this and, by way of imitation of our products, seek to retract their former aspersions and insinuations.

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VERIFICATION

of our claims will be the result of a practical investigation of our products of Cascara Sagrada. Ninety-nine one-hundredths of the reports asserting the therapeutic value of Cascara Sagrada are based upon our preparations. Therefore, specify P., D. & Co., reject all substitutes, and satisfaction will invariably follow.

FAILURE *IN THE ADMINISTRATION OF CASCARA SAGRADA is often due to the employment of AN INFERIOR PREPARATION or one made from A SPURIOUS DRUG.*

SUCCESS *MAY BE ASSURED BY REMEMBERING that: 1.—We are the INTRODUCERS of the drug. 2.—Medical reports proving its efficacy have almost invariably been based upon the use of OUR products. 3.—Our facilities for securing the true bark, properly gathered, and for manufacturing a therapeutically efficient product, are unequaled.*

Fluid Extract Cascara Sagrada

as first introduced by us, remains by far the strongest and best preparation upon the market, and, quality and dose considered, is likewise the cheapest.

Cascara Cordial

is adapted to those cases of habitual constipation which, in the judgment of the doctor, require a mild and prolonged treatment for effectual and permanent cure, and is more especially indicated for administration to aged people, ladies, and children.

Fluid Cascara Sagrada Aromatic

is introduced to meet a demand for a more palatable preparation than the Fluid Extract Cascara Sagrada, and one which, at the same time, may be exhibited in smaller doses than the Cordial.

SPECIFY "P., D. & CO."

PARKE, DAVIS & CO.,

DETROIT, NEW YORK, KANSAS CITY,
AND
WALKERVILLE, ONTARIO.

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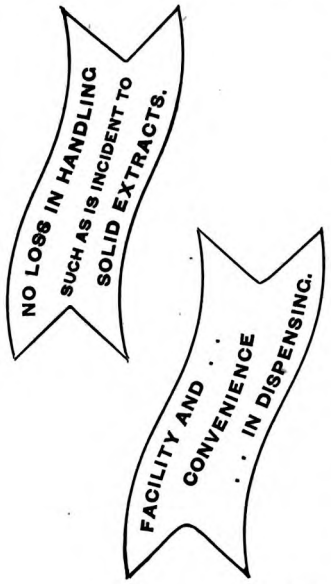
A WORD ON

POWDERED EXTRACTS.



The difficulty in dispensing Solid Extracts led to a demand for extracts in the form of impalpable powders which should possess all the virtues of the pilular extracts without their objectionable characteristics.

Our Powdered Extracts, *with the single exception of Indian Cannabis*, in medicinal potency are the equivalent of our Solid Extracts, *i. e.*, one grain represents generally five grains of crude drug of PRIME QUALITY.

Where the constituents of the drug are alkaloidal, a system of assay adjusts the finished product to a definite standard.

SPECIAL NOTE.—Owing to the oleo-resinous character of Indian Cannabis, a permanent powder equal in medicinal value to the Solid Extract is impracticable, THE CLAIMS OF OTHER MANUFACTURERS TO THE CONTRARY NOTWITHSTANDING. Powders generally offered in the market as equal to the Solid Extract will be found **inferior** and **uncertain.** Our Powdered Extract Indian Cannabis is ¼ the strength of the Solid Extract; in other words, four grains represent one grain of our standard Solid Extract.

We have continuously manufactured Powdered Extracts for the past **15 years.** Experience in the manufacture of any line of pharmaceuticals is of great value—*especially is this true of Powdered Extracts.*

Therefore specify "P., D. & CO."

PARKE, DAVIS & CO.,

DETROIT, NEW YORK and KANSAS CITY, U. S. A., and WALKERVILLE, ONT.

Special Note.

Samples of our preparations as advertised in this issue of the NOTES, with literature apropos, we will promptly forward to any physician willing to defray expressage.

Each preparation will be supplied in quantity sufficient for practical investigation.

Address

PARKE, DAVIS & CO.,

DETROIT, MICH.

ETHEREAL ANTISEPTIC SOAP.

Many preparations have been offered for the purpose of rendering aseptic both the hands of the operator and his instruments, but with more or less success. Ethereal Antiseptic Soap in every way answers the purpose for which it was devised. Not only is it a perfect antiseptic, but its cleansing powers, combined with its antiseptic properties, render it a most valuable adjunct to the armamentarium of the physician and surgeon.

Dr. W. W. Keen, the distinguished Philadelphia surgeon, states as follows: "I find it the best preparation I know of for cleaning the hands and softening them. It also destroys odors about the hands. I use the Soap constantly in my clinic and in my office with great advantage."

Its use has been very lately extended most successfully to the treatment of parasitic affections.

PARKE, DAVIS & CO.,

MANUFACTURING CHEMISTS,

DETROIT, - NEW YORK, - KANSAS CITY, - U. S. A., and WALKERVILLE, ONT.

☞Write for literature affording detailed information with reference to our entire line of Antiseptics and Disinfectants.

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Seasonable Preparations

OF WHICH **IMITATIONS** ARE UPON THE MARKET.

Since we guarantee the QUALITY of these products, will you not SPECIFY "P., D. & CO." and accept NO SUBSTITUTES?

SYRUP TRIFOLIUM COMPOUND.

A combination of valuable vegetable alteratives, with 8 grains of Potassium Iodide to the fluidounce. Administered to patients with sluggish circulation, constipation, cold extremities, flabby muscles and general malaise, its tonic action is very manifest.

SYR. IRON CHLORIDE (WELD).

The official Tincture Chloride of Iron possesses several objectionable features, particularly its destructive action upon the enamel of the teeth. Syrup of Iron Chloride (Weld) is not injurious to the teeth, and furthermore is without other untoward effects characteristic of the official tincture.

SYRUP HEMATIC HYPOPHOSPHITES.

In the debilitated conditions in which the preparations of the hypophosphites are usually prescribed, Syrup Hematic Hypophosphites will prove useful.

PEPSIN CORDIAL.

Just at this season especial attention is directed to the value of Pepsin Cordial in infantile diarrhœa.

"I find Pepsin Cordial a most satisfactory remedy in infantile diarrhœa, and all summer complaints due to faulty digestion and an acid condition or ferment in the alimentary canal. In diarrhœa with green acid discharges, in cholera infantum, in nausea and vomiting, its action is culminative and decisive."—CHAS. KELLY GARDNER, M.D., in *Medical Age*.

CHLOR-ANODYNE.

A combination of anodynes, antispasmodics and carminatives. A palliative and ofttimes an efficient remedy for colic, cholera morbus, spasmodic pains, etc. Of value wherever antispasmodics or anodynes are indicated.

LIQUOR SEDANS.

A utero-ovarian sedative and anodyne, combining in an agreeable form Hydrastis, Viburnum, and Piscidia. Efficient in the treatment of dysmenorrhœa and many utero-ovarian irregularities once deemed amenable only to surgical procedure.

SYRUP HYDRIODIC ACID.

Heretofore we have listed Syrup Hydriodic Acid prepared in strict accordance with the U. S. P. requirements, which specify 1 per cent. of absolute Hydriodic Acid. In addition we now offer a syrup containing 2 per cent. of the acid, therefore double the strength of the U. S. P. preparation. It is ofttimes desired to saturate, so to speak, the economy of the patient with the iodide, a procedure which is greatly facilitated by our Syrup Hydriodic Acid, 2 per cent.

Syrup Hydriodic Acid, U. S. P., may be administered by simply diluting one-half the 2-per-cent. preparation.

ANTISEPTIC TABLETS.

A reliable solution, such as is made by using Antiseptic Tablets, will obviate the necessity of using the stronger solutions which have been known to cause severe poisoning and even death.

EUCALYPTUS AND THYMOL ANTISEPTIC.

A liquid antiseptic of the widest range of usefulness. Being non-irritant and non-escharotic, it may safely be administered internally as well as externally; and furthermore, hypodermically, as a douche, by spraying, atomization, or otherwise. Equals in antiseptic power Iodoform and Carbolic Acid, and does not possess their objectionable characteristics.

PARKE, DAVIS & CO.,

DETROIT, NEW YORK, KANSAS CITY, U. S. A., and WALKERVILLE, ONT.

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SOLUBLE ELASTIC CAPSULES

The form in which remedial agents are to be administered is becoming more and more a question of much moment. Disappointment has often followed the administration of certain drugs in a form not easily soluble, and hence not quickly assimilable by a weak or debilitated digestive function.

By **delicate** and **fastidious patients,** moreover, nauseous drugs, being repugnant both to the palate and to the stomach, are refused and thus their use in such cases practically prohibited. It is possible, of course, in many instances, to disguise their taste and odor by means of liquid condiments, but thereby the disadvantage of an unduly large dose is experienced.

SOLUBLE ELASTIC CAPSULES OVERCOME ALL THESE OBJECTIONS.

10 GRAMMES. 5 GRAMMES. 2½ GRAMMES. 10 MINIMS.

Prepared from the Finest French Gelatin by Improved Processes and Apparatus. Unexcelled in Quality.

EASILY SWALLOWED, because of their lubricity.

AS TO SOLUBILITY, the capsule is easily dissolved by the gastric secretions, and so offers practically no hindrance to the action of the medicine in any stomach, however weak.

THE MEDICINAL INGREDIENTS, whether or not of our own manufacture, are of the best quality obtainable.

PARKE, DAVIS & CO.,

DETROIT, NEW YORK, KANSAS CITY, U. S. A., AND WALKERVILLE, ONT.

IMPROVED LOFOTEN

COD-LIVER OIL.

We take pleasure in introducing to the notice of Medicine and Pharmacy our IMPROVED LOFOTEN COD-LIVER OIL, which we claim is superior to any other on the American market. It is prepared with a special view of ensuring

PERMANENCY, PALATABILITY AND THERAPEUTIC EFFECT.

Our **Lofoten Cod-Liver Oil** is *nearly tasteless and odorless*, and the many disagreeable effects which in former times followed the use of cod-liver oil are almost entirely avoided.

Its superiority to emulsions is very marked. Palatability is the chief advantage possessed by emulsions, and now that **Lofoten Cod-Liver Oil** has been rendered so palatable there seems to be little occasion to administer mixtures containing acacia, which is itself a calcium salt and has no place among foods.

PARKE, DAVIS & CO.,

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THERAPEUTIC NOTES.

VOL. I. DETROIT, MICH., MAY, 1894. No. 2.

Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department
PARKE, DAVIS & CO.,
Detroit, Mich., U. S. A.

Editorial.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

NOTHING TO CONCEAL.

Despite the invitations to inspect our departments and processes, which we have heartily and repeatedly extended in the past, a slight misgiving seems yet to lurk in the minds of many, lest a visit be regarded by us as an intrusion. We take this public means of assuring all our friends that a cordial welcome awaits any physician who wishes to inspect our laboratories and observe the detail of our methods. Access to any portion of our establishment has never been refused, when requested; and every department, without exception, is as open as the day to the inspection of physicians and pharmacists.

We have no placards warning off intruders, no closed doors or inaccessible rooms, no employés solemnly sworn to secrecy—in brief, none of the hocus-pocus of concealment which confronts and embarrasses the visitor at many a manufacturing house, and none of the evasions with which awkward questionings are often silenced.

Whenever pleasure or business brings the reader to Detroit, he will find our doors wide open, and we promise that the small investment of time will not prove devoid of profit or interest.

OUR INTRODUCTION OF CASCARA SAGRADA.

When in 1877 we received the first bale of Cascara Sagrada that ever crossed the Sierra Nevadas, we scarcely ventured to hope for the enormous consumption of this invaluable drug which has since become an actuality. A careful estimate of the quantity annually used in various preparations designed for the cure of habitual constipation would exceed five hundred thousand pounds of the crude drug. The latter now figures prominently in the markets of every civilized country on the face of the earth; its preparations are familiar to the practitioners of every nationality; and in the American, British, and Austrian Pharmacopœias, Cascara Sagrada enjoys the distinction of an official remedy.

If ever the introduction of a valuable medicament has been attended with outrageous abuse and injustice, such was at first our undeserved reward for seeking to establish the virtues of Cascara Sagrada. The older members of the profession will well recall the odious reflections which were cast upon the remedy and upon ourselves as its introducers. "Misrepresentation of its properties;" "reinforcing of the fluid extract with aloes, senna, and strychnine;" "suppression of the botanical name"—such were the charges made against us.

Time and truth have silenced these slanders. The popularity of Cascara Sagrada is steadily augmenting. Its introducers need no longer fear that their motives will be besmirched. The one obstacle which yet prevents its universal employment is the inferior quality of galenicals, which are so frequently offered as substitutes for our preparations, and which tend to bring Cascara Sagrada into disrepute.

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Obviously the introducer of any new drug will alone be impelled by every motive of self-interest and probity to guard jealously the character of its preparations. We have spent vast sums, in the form of samples for free experiment, during our introduction of Cascara Sagrada; our reputation is inseparably associated with its virtues; and we have every incentive to furnish only the best and purest preparations.

There can be no doubt that what reputation the drug to-day possesses is founded on trials with our fluid extract. Taking the reports on Cascara Sagrada in medical literature, a majority at least will be found to mention our brand. We accordingly feel warranted in respectfully requesting that medical men, in justice to themselves and to us as introducers, specify PARKE, DAVIS & Co. when prescribing the pharmaceutical preparations of Cascara Sagrada.

THERAPEUTICS OF CASCARA SAGRADA.

The purpose of the following is not to offer a lengthy disquisition on the various applications of Cascara Sagrada to the treatment of disease. This phase of the theme has been exhausted by us in the past; and to those desiring complete information with respect to the therapy, botany, pharmacy, chemistry and microscopical appearance of the drug, we shall be happy to furnish on application our Working Bulletin in which the subject receives full justice in all its bearings.

It is merely our purpose, in this connection, to give warning against the danger of failure to effect a cure of habitual constipation, if the mistake be made of using Cascara Sagrada as a cathartic. *According to the views of competent authorities the true function of the drug is that of a tonic laxative. Given in cathartic doses it is not unlikely to defeat the purpose of its administration, which ought to be the* CURE *of habitual constipation.* Its action seems to be directed to the vaso-motor nervous system, *increasing the peristaltic action of the intestines*, and stimulating the secretions of the alimentary canal. The bowels are thus restored to their normal activity. Properly administered, there is no reaction of costiveness, nor is there any griping.

We cannot too forcibly emphasize the fact that Cascara Sagrada has passed beyond the experimental stage in the treatment of habitual constipation. The list of authorities attesting the curative properties of this valuable drug would alone occupy the space of a goodly brochure. *During a test of sixteen years it has seldom been found wanting when a reliable preparation has been employed.* Where the expected cure does not follow the administration of Cascara Sagrada, the failure may be almost invariably imputed to inferior preparations. We here cite by title a few of the many reports on the value of Cascara Sagrada which have issued from the most diverse sources:

CASCARA SAGRADA IN HABITUAL CONSTIPATION.

Reports by Professors Dunster, Brackett, Clark, Leonard, Mettler, Rusby, and a host of other medical men in good standing.

British Medical Journal, April 11, 1885. Abstract of thirty-three cases treated by Dr. Reid.

Report of Dr. Thomas Russell, Professor Yale Medical School.

Report of H. M. Fussell, M.D., in *Therapeutic Gazette*, 1887, p.299. Table of fifty cases of habitual constipation.

Report of Prof. Dr. Senator in *Wiener Med. Blätter*, Jan. 8, 1885.

Report of Dr. H. C. Glanville, *Lancet* (London), May 9, 1885.

IN RHEUMATISM.

Report of H. T. Goodwin, M.D., Assistant Surgeon U. S. Marine Hospital Service, in the *New York Medical Journal*, June 9, 1888.

American Practitioner and News, Nov. 24, 1888.

Medical Summary, November, 1888, report of James M. Hole, M.D.

Dr. J. S. Morris, in *Medical Science.*

Editorial in *Alabama Medical and Surgical Age.*

W. M. Dunn, M.D., in *Medical Age.*

IN TREATMENT OF HÆMORRHOIDS.

C. W. Hansen, M.D., in *New Preparations.*

Editorial in *Pacific Record.*

IN TREATMENT OF DIARRHŒA.

W. W. Morrison, M.D., in *Therapeutic Gazette.*

H. C. Shipley, M.D., in *Therapeutic Gazette*

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IN TREATMENT OF CHRONIC VARICOSE ULCER.

J. W. Van Winkle, M.D., in *New Preparations.*

IN DYSPEPTIC DISORDERS.

F. C. Herr, M.D., in *Therapeutic Gazette.*

Reprints and abstracts of the foregoing papers will be cheerfully furnished the reader, on request.

In conclusion, we may be permitted to quote the admonition of Dr. F. E. Stewart —prompted by his own experience and by the testimony of many eminent physicians: "From the nature of habitual constipation, it is not to be cured by cathartics, but by the restoration of tone *through the long-continued use of tonic laxative remedies.* Nothing is more important to insist upon than this: *To obtain the benefits of Cascara Sagrada it must be employed in small doses continuously for a long time.*"

PREPARATIONS OF CASCARA SAGRADA.

Satisfied of the value possessed by this drug, the practitioner will first inquire, What form is the most suitable for its administration?

We may be permitted to state at the outset that no preparation of Cascara Sagrada is manufactured by us from bark less than two years old. This seasoning process is of prime importance. Mature bark—in which certain fermentative changes have been accomplished—is the only proper source of a good fluid extract or other galenical representative.

The old-time fluid extract is the preparation which gave the drug its reputation, and which will still yield the greatest service in cases where its bitter taste is not too repellent. This product contains every principle of the bark unmodified by the process of manufacture, and may be administered with greatest certainty of successful results. The constituents of Cascara Sagrada have been the subject of long investigation at our laboratory, with a special view to disguising or overcoming the bitterness. In this we have succeeded: we now have a complete line of tasteless and aromatic preparations of the drug. But we are not prepared to vouch for the equal therapeutic worth of the preparations whose process of manufacture makes it necessary to tamper with the bitter principle. To that principle we ascribe much of the tonic virtue of Cascara Sagrada, and we recommend the use of galenicals from which it has not been eliminated, as the best agent for curing constipation. If the patient clamors against the bitter taste, then, of course, our soluble elastic capsules or our pills, both of which contain the unmodified medicinal principles of the drug, will prove the best possible substitute.

CASCARA CORDIAL is, as its name indicates, an aromatic preparation of Cascara Sagrada. Each liter contains 125 Gm. of true *Rhamnus purshiana.* It is specially suited to the needs of costive women and children.

FLUID EXTRACT CASCARA SAGRADA (Formula of 1887) is permanent, perfectly miscible with water, and almost *free from bitterness.* Specify "Formula of 1887."

When a more palatable preparation than the preceding is indicated, nothing will answer more admirably than our FLUID CASCARA SAGRADA AROMATIC. In prescribing the latter, pray specify "P., D. & Co.," lest some other product be furnished.

Our SOLID EXTRACT CASCARA SAGRADA combines all the tonic and laxative properties of the true drug. *Note that the bitter principle, so essential to cure, has not been eliminated.* Dose, as a laxative, 1 to 5 grains; as a cathartic, 7 to 15 grains.

Our POWDERED EXTRACT is of the same strength as the Solid Extract.

Our SOLID EXTRACT CASCARA SAGRADA (Formula of 1887) is readily soluble in water and in the gastric juices. When used for pills, powdered althæa in small quantity is the only excipient needed—do not use tragacanth for the purpose! Specify "Formula of 1887."

Our concentration CASCARIN (Formula of 1887) is in scale form; not hygroscopic; readily powdered, and soluble in water. It contains only the active constituents of the drug.

We offer SOLUBLE ELASTIC CAPSULES OF CASCARA SAGRADA, containing one, two, and three grains, respectively, of powdered extract.

We exhibit Cascara Sagrada in a variety of

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simple and compound pill formulæ (see pages 46, 47, 49 and 50 of our list, Nos. 29, 49, 50, 94, 150, 151, 152, 153, 154 and 155).

Finally, our ELIXIR CASCARA SAGRADA represents in each fluidounce 120 grains of true bark. Of our ELIXIR CASCARA SAGRADA COMPOUND, each fluidounce represents 60 grains of Cascara Sagrada and 30 grains of Berberis Aquifolium.

Since our introduction of Cascara Sagrada we have devoted infinite study to every phase of its manufacture. The foregoing line of galenicals accordingly represents the last and best results of knowledge, skill, and care in the manipulation of the drug.

OUR INTRODUCTION OF KOLA.

As early as April, 1881, the *Therapeutic Gazette* published a note on the remarkable properties of Kola in relieving nervous depression, and its almost specific effect in combating the intoxicating influence of alcohol. In the same year the London *Lancet* contained divers notes on its therapeutic applications, which were very generally abstracted or reprinted by the American medical press.

The commercial, social, dietetic, and curative value of the Kola is fully set forth in our Working Bulletin which was the first systematic summary of existing literature on Kola ever distributed to the medical profession. Full information, botanical, chemical, microscopical, historical, and therapeutic, is tersely presented in this Bulletin, and will be promptly sent to all medical men who may wish to assure themselves of the invigorant and stimulating properties of Kola.

Let it be remembered that vast quantities of Kola are daily consumed in West Africa, Mauritius, the West Indian Islands, Brazil, Mexico, and other lands, by the natives, who find in it all the solace of tobacco, all the exhilaration of coffee, and a fund of that reserve energy which the South American Indian is wont to seek in his precious coca.

In our introduction of Kola to the profession, the fluid extract has yielded highly gratifying results. Dose, 10 to 30 minims; not miscible with water.

Our ELIXIR KOLA COMPOUND is of more recent introduction. One fluidounce represents 40 grains each of Kola, Coca, and Celery. We shall be pleased to receive requisition for samples and literature. Cases requiring invigorant, tonic treatment will respond gratefully to the use of Elixir Kola Comp. (P., D. & Co.).

Our KOLA CORDIAL affords a highly palatable means of administering the drug; each fluidounce represents 120 grains of Kola nut. Dose, 1 to 2 teaspoonfuls (4 to 8 Cc.).

Dr. Leon Ernst Monnet, of Paris, dwells very enthusiastically on the benefits obtained from Kola in nervous diseases.

Dr. J. M. Barrickman recommends Kola as a cure for habitual alcoholism.

Dr. N. Hudson, in *Philadelphia Medical Times*, reports most favorably on the results following the administration of Kola in cardiac diseases.

E. Heckel and F. Schlagdenhauffen, in a valuable memoir read before the Union Scientifique des Pharmaciens de France, state that Kola is a remedy for atonic diarrhœa.

MAGNA EST VERITAS!

The logical plea made by us for years in favor of adopting definite standards of potency for galenical preparations has not failed to bear gratifying fruit. Not only has our propaganda effected the standardization of Nux Vomica and Opium preparations in the U. S. Pharmacopœia for 1890, but the Swiss Pharmacopœia has also lent its sanction to the principle for which we have contended, in adopting standards for a number of galenicals.

The result is not surprising to us. The truth is that not an argument can be offered against standardization as a means of assuring the uniformity of the preparations of all powerful, narcotic or toxic drugs. Not a single distinguished pharmacist in the country took ground different from our own. On every side it was recognized that without standardization, the differences in active principle prevailing in all crude drugs and due to any one of a number of causes—soil, climate, season of gathering, care employed in curing and storing, period of storage, influence of insects—must inevitably be encountered in the finished preparations, no matter how faithfully the latter might be made. Standardization will render galenicals

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as uniform and definite in medicinal power as is sulphate of morphine, or cocaine hydrochlorate.

The only explanation which can be made of the groundless opposition to standardization in the past is afforded by Prof. Bastin, in words recently quoted by the *Bulletin of Pharmacy:*

"There are always people who set themselves up against any reform that may be started or suggested. Conservatism is bred in their bones; they plod through life in the ways of their grandfathers, and insist that everyone else shall do as they do; they brace themselves against the wheels of progress, and refuse to budge until it is clear they must do so or be run over and crushed.

"Another class fight progress from motives of self-interest. Every new invention, every improved process, is fiercely opposed by this class, because they fancy it will take away or circumscribe their occupations. The invention of a machine which will save the labor of ten or a hundred men becomes the object of their hatred. They would place a prohibitory tax on ingenuity, and a premium on stupidity.

"These classes naturally oppose such innovations as the standardization of pharmaceutical preparations. It may not yet be possible to standardize all liquid preparations so that the medicinal strength will be absolutely uniform, *but every step in this direction is a step in advance.* Every conscientious and intelligent pharmacist and physician will look with favor on any well directed efforts to render fluid preparations more uniform, accurate, and reliable."

A DISTINCTION WITH A DIFFERENCE.

The platform upon which we have taken our stand in soliciting the favor of the medical and pharmacal professions has from the very outset excluded our house from the profits resulting from patent, trademark or proprietary protection. We have uniformly asserted in unmistakable terms the disfavor with which we regard this motley band of nostrums and the mischief wrought by the absurd, unmerited protection accorded their exploiters.

What, then, are the crying evils which thrive under this baneful *régime* of unjust monopoly? Are there no legitimate products deserving protection on the ground of merit, prolonged research, independent discovery? These inquiries admit of terse reply, and of a distinction too rarely made.

1. The patenting or trademarking of pharmaceutical preparations is alike repugnant to the plain, explicit code of the reputable medical practitioner, and to the unwritten code of pharmacists (wherever pharmacy is practiced as a profession), chemists, and scientific men generally. At home and abroad, this feeling of unconstrained obligation prevails universally among pharmacists who look upon their vocation as something more than a trade or a traffic.

2. The preparations whose protection we regard as utterly unjustifiable have nothing to merit protection. In many cases their formulæ are merely filched from some prescription-file. Usually they represent compounds or mere mixtures such as any tyro in pharmacy can readily prepare. The ingredients are selected with respect to their cheapness, and a fancy name is applied to the combination. This name is then trademarked, and in a twinkling Baldine, Liverine, Syphilisia, Dyspeptine, Aphroditine, and others are evolved! Such is the birth and such the true character of the rubbish which, thanks to our benevolent laws and to lavish advertising, is thrust upon the sister-professions as original (!), meritorious (!!) additions to the means of treating disease!

3. First advertised to the medical profession alone, the proprietors simply bide their time. After sufficient testimonials have been obtained from medical men who are moved to endorse the formulæ by their supposed merit and by the guise of ethical advertising to the profession only—not to the public, Lord forbid,—these endorsements are not seldom proclaimed directly to the laity. In a jiffy the grand transformation has occurred. Presto! and the protected specialty, so innocent in appearance, makes its bow as a regular "patent medicine." Henceforth, in not a few instances, its name may be found on the municipal walls in huge type, in the newspaper columns, and on the cover pages of every comic weekly. Can it be denied that this has been the actual history of

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he protected, proprietary specialties, with a lonely exception here and there? If the reader fancies we are too harsh and sweeping in our statement, let him incline unto us his ear that we may whisper the names of the emulsions, the malt products, the tonics innumerable, and, finally, the animal extracts—Cerebrine *et al.*—which have undergone just such a metamorphosis. The maxim is plain: first, hoodwink the profession, capture its testimonials, start the doctors prescribing the "ethical" combination; then, when well under way, advertise to the public—that dear public which Mr. P. T. Barnum assured us does so love to be deceived!

4. From this reprobation, it may be urged, we should exempt one class of preparations which are strictly scientific in character—preparations fraught with marked therapeutic virtues and involving in their origination the most arduous and able investigations. Objectionable as is the entire fabric of patent protection, we are not disinclined to grant the justice of this plea, as applied to such products as Phenacetin, Salol, Sulfonal, and others. These are the fruit of genuine scientific labor and reflection. They possess valuable medicinal properties. Their discovery is highly creditable. Their manufacture merits protection. We hold that the products themselves should be free—exempt from all legal restrictions; but the process of manufacture is deserving of protection, since it is plainly the intellectual property of its inventor. Such is the view embodied in the German laws; and though our own statutes go farther and create a vicious monopoly of name, process and *product*, the beneficiaries, at all events, offer a valuable article, even if the price is commonly excessive, and their medicinal agents should not be confused with the horde of nostrums conjured into existence by the most anomalous laws on the face of the earth.

Let the distinction be, then, borne well in mind. On the one hand, Salol, Sulfonal, Phenacetin; on the other, Dyspeptine, Syphilisia, Gonorrhine, Liverine, Grippine, Aphroditine—the endless rubbish born in some prescription-file, nursed by the doctor's endorsement, and now thriving apace on newspaper advertising. Wittily and truly has it been said, "If hell is paved with good intentions, it is papered with testimonials"—and abounds in nostrums.

OUR PHYSICIANS' DESCRIPTIVE CATALOGUE.

We have been highly gratified by the flood of responses which came pouring in to the offer made in the first number of the NOTES, and the comments which we have since received from recipients of our Physicians' Descriptive Catalogue. The sum of ten cents for a board-bound copy of this convenient and comprehensive work is a tiny charge for a hand-book containing 384 pages of solid information. The actual postage is eight cents! May further use of the volume confirm the flattering opinions of its value which have reached us from every quarter!

For members of the profession as yet unfamiliar with our descriptive catalogue, we quote a few of its various chapters: Weights and Measures, Posology, Thermometry, Obstetric Calendar, Incompatibility, Differential Diagnosis for Eruptive Fevers, Poisons and Antidotes, Therapeutic Suggestions, etc., etc.

We venture to recommend the selection of a cloth-bound copy. It is more permanent and satisfactory to the owner; sent on receipt of twenty-five cents. A cloth binding is worth the additional fifteen cents several times over.

Are not patients unreasonable and querulous enough? Is it necessary or wise to furnish a color of truth to their galling criticisms, by risking the failure which may follow the administration of a cheap, substituted remedy?

The following has proved of uncommon benefit where the patient has taken cathartics until they have destroyed all muscular tone in the bowels, and stomach as well:

℞ Fl. ext. Cascara Sagrada (P., D. & Co.), ʒ j.
Ext. of malt (P., D. & Co.), ʒ ij.
Syrup. simplex, ʒ ij.

What would be thought of the artisan who would leave the selection of his tools to chance or the preferences of another? Yet medical men, plying a craft infinitely more difficult and trying than that of any artisan, not infrequently permit others virtually to dictate what means they shall use in treating disease. Specify your remedies: do not leave their quality to chance or to another's choice.

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Practical Therapeutics.

THE HYPOPHOSPHITES.*

Of late years the alkaline hypophosphites —hypophosphite of soda, of potash, of lime —have been growing in public favor. All three mentioned are closely allied in medical properties and uses, for which reason they are generally considered together and commonly offered in combination. They belong to the class of nervine tonics, or, to employ the words of Dr. J. F. Churchill, who first brought them prominently into notice, "they increase the nervous forces and are the most powerful hæmatogens, possessing all the therapeutic properties of phosphorus." Again, the hypophosphite of potash appears to act far more energetically as a liquifacient than either the hypophosphite of soda or lime; so much so, in fact, that the late Dr. Thorowgood declared he had "known great mischief resulting from the incautious administration of this salt alone to persons afflicted with tubercular deposit in the lungs." He added, "as a gradual tonic and restorer of failing nerve force I prefer the hypophosphite of soda or of lime to the potash salt, and either of these will answer all the purposes of the pure phosphite as an internal remedy, though the three are more manageable and agreeable when employed in combination."

Mr. Taylor also, who carefully examined the properties of hypophosphites, suggests the soda salt is "better adapted for blood diseases than those of potash and lime, and the hypophosphite of ammonia for diseases of the secretory organs."

All the hypophosphites are very soluble in the animal fluids and are readily admitted into the circulation—more so, it is believed, than any other of the oxides of phosphorus. Their assimilation, moreover, is promoted by sugar, which has the additional recommendation of disguising a taste that to many persons is most objectionable. It is for this reason that hypophosphites are generally found in the market embodied in elixirs, frequently in combination with nux and iron —hæmatic hypophosphites, for instance.

Dr. Thorowgood especially recommends the addition of iron citrate to these salts in the treatment of anæmia, and also adds that such combination is sometimes most effective in the management of phthisis. In debility resulting from prolonged lactation, in some forms of dyspepsia, in anæmia and leucocythæmia, in catarrhal and leucorrhœal discharges, in myalgia and muscular pains, etc., Mr. Taylor found the administration of hypophosphites attended with marked benefit, and prescribed with satisfactory results in all cases where there was reason to suppose phosphates to be morbidly deficient.

It must be remembered the demand for the phosphite of lime in the construction of the teeth contributes to the disturbing influence commonly described as the "fever of dentition," and in this, whether it occurs in the robust or in weakly, ill-fed children, these salts may be employed with marked promise.

[Our SYRUP HEMATIC HYPOPHOSPHITES is a permanently clear preparation, while others of a similar formula deposit an unsightly precipitate. Each fluidounce contains:

Potassium Hypophosphite, 1½ grains
Manganese Hypophosphite, 1 grain.
Strychnine Hypophosphite, ⅛ grain.
Ferrous Hypophosphite, 1¼ grains.
Calcium Hypophosphite, 1 grain.
Quinine Hypophosphite, $\frac{1}{16}$ grain.

Dose, 1 to 2 fluidrachms (4 to 8 Cc.).]

* From *Medical Age*, April 10th, 1894.

TREATMENT OF TYPHOID FEVER.*

Our exchanges are filled with many valuable articles on the Treatment of Typhoid Fever, and there are a number of different methods advocated, each one of which is supported by an unusual good per cent. of recoveries. One author says the treatment of typhoid fever should begin before the fever is present to treat. In other words, our treatment should, in reality, be prophylactic. As so many of the dangers of this fever lie in the long period of pyrexia, so any treatment that will reduce the temperature is indeed prophylactic. Dr. A. N. Collins, of Detroit, contributes a paper to the *Physician and Surgeon* for December on this subject. He says if it were only possible to supply the human race with an abundance of pure water,

* Dr. Chas. H. Stowell, in *Food*.

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and also if it were possible to burn all excreta from every human being, typhoid fever would vanish from the earth. The writer relies greatly on the treatment advocated by Pepper, who makes the statement that in ten years' practice he has never lost a case of typhoid fever, and attributes his success to the nitrate-of-silver treatment. The plan of treatment is, if the patient is seen early, to move the bowels freely with calomel. If the bowels are not too active, a dose of calomel is given every second day. No explanation is given for the beneficent action of the nitrate of silver, nevertheless its good effects are unquestionable. For the intestinal antiseptic, 2½-grain pills of thymol are given every four or five hours. A most important point is to keep the temperature down. The author does not rely upon the Brand treatment, thinking it impracticable except in hospital work. He relies almost entirely on frequent sponging, although phenacetin and salol have both been used. The author thinks all these remedies as well as acetanilid are perfectly safe if judiciously employed. For diet, he relies principally upon milk, chicken broth and liquid peptonoids. On these general principles the writer has treated fifty-eight cases without a death. Three of these had hæmorrhages from the bowels, two of which were very profuse and dangerous. In these cases, Parke, Davis & Co.'s new preparation of ergot was used hypodermically with satisfactory results.

From the many reports of cases of typhoid fever treated by modern methods it certainly appears that the mortality of this disease must be far less than it was a few years ago.

A REMARKABLE ASTRINGENT, ANTISPASMODIC, AND ANODYNE.

If asked, what remedy is most prompt and efficacious in the treatment of diarrhœa, cholera morbus, dysentery, colics, cholera, cramps, and renal pains? many physicians would reply without hesitation, Chlorodyne. A host of experimenters are unanimous in asserting the almost magical properties of this secret preparation first prepared by Dr. J. Collis Brown. Indeed, the only obstacle to its universal use is its proprietary character and the secrecy in which its composition is shrouded.

CHLOR-ANODYNE (Parke, Davis & Co.) is an ethical preparation, manufactured in strict accord with the published formula, never advertised to the public, and unprotected by patent, copyright, or any form of secrecy.* It has been subjected to severe clinical tests; and of its value in the numerous bowel troubles which begin their course with the advent of warm weather, there can be no more doubt than of the anti-malarial virtue of quinine. This is strong language, but the glowing praises of Chlor-Anodyne which have invariably followed a fair trial make good our claims.

The key to this extraordinary popularity is the promptness with which its influence is exerted in subduing violent pain and other distressing symptoms. So speedy and grateful is its action that a vial of Chlor-Anodyne should form a part of every emergency case during the summer.

Its composition speaks for itself. Each fluidounce contains:

Morphine hydrochlorate, 2⅞ grains.
Tinct. Indian cannabis, 46 minims.
Diluted hydrocyanic acid, 9 minims.
Chloroform, 46 minims.
Oil of peppermint, 1½ minims.
Tinct. capsicum, 1½ minims.

Dose for an adult, 15 minims frequently repeated according to indications.

CHLOR-ANODYNE is stimulant, sedative, antispasmodic. In the first category, we have the oil of peppermint and tincture of capsicum, both of which are rapidly absorbed. Not less readily absorbed are the two most powerful antispasmodics and seda-

*The charge having been made by interested parties that the label of Chlor-Anodyne was copyrighted years ago when this product was first offered the profession, we would state that this action was taken by our predecessors, Parke, Jennings & Co., on the 31st day of March, 1871, and had no reference to any protection save as against the action of a partner at that time retiring from our concern. We have since published to the medical profession a statement, which we now reiterate, that we claim no rights whatever under this copyright, leaving any competitor free to manufacture the article and under the same name, if he deem it advisable. Further, we have written to the Librarian of Congress under date of March 18, 1881, requesting him to void the copyright.

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tives known, viz., hydrocyanic acid and chloroform. Furthermore, the peculiar sedative influence exerted by Indian cannabis within the intestinal tract is almost magical; and to this tableau of agencies must be added, finally, the well known properties of morphine muriate.

The clinical experience of many American and foreign physicians with this remedy, as published in medical literature, is summarized in our Working Bulletin which we send *gratis* on request.

"When indicated I have repeatedly employed Chlor-Anodyne with the most gratifying and brilliant results." (S. H. POTTER, M.D.)

"Chlor-Anodyne has justly acquired a high reputation as an anodyne. The formula as improved by Parke, Davis & Co. we have found most reliable." (*Southern Medical Record.*)

"Despite the fact that I have long used the Gilman chlorodyne, I find in the preparation devised by Parke, Davis & Co. and sold under the name of Chlor-Anodyne a more efficient and elegant combination. *I do not hesitate to say that nothing as yet made is quite so satisfactory.*" (E. P. HURD, M.D., Newburyport, Mass., in *Therapeutic Gazette.*)

"Chlor-Anodyne is not only elegant, but efficient in the highest degree. I have used it in several cases with perfect success. *I have learned never to go on a professional visit without my pocket vial of Chlor-Anodyne.*" (W. UNDERWOOD, M.D., in *New Preparations.*)

ARSENITE OF COPPER IN TYPHOID FEVER.*

Dr. A. H. Thomas, of Hurley, Wis., reports to the *American Therapist* a list of ninety cases of typhoid fever. But one in this list was fatal. Dr. Thomas does not employ the Brand treatment, but relies largely on the arsenite of copper. He lays great emphasis on the fact that this treatment leaves the alimentary tract in excellent condition after the fever is over. For diet, milk was relied upon except in cases where it could not be taken. Alcoholic stimulants were not used except where there was great weakness. The nourishment is taken regularly through the day, but discontinued during the night. Comparing his cases where calomel was and was not used at the beginning of the disease, he concludes that the cases in which the calomel was omitted did the best. The arsenite of copper is given in doses of $\frac{1}{100}$ grain each day, in divided hourly doses, while awake. The writer calls attention to the simplicity of this treatment and to the high per cent. of recoveries, the only death being due to intestinal hæmorrhage.

[We supply tablet triturates of Copper Arsenite, $\frac{1}{100}$ grain, and a tablet triturate containing $\frac{1}{1000}$ grain. This agent has been employed with great satisfaction in a variety of bowel disorders, especially in the diarrhœa of typhoid fever. Circular and samples furnished on request.]

* *Food.*

F. Gundrum, M. D., in *New Preparations:* "I have used the Fluid Extract Cascara Sagrada, manufactured by Parke, Davis & Co., which has proved reliable every time."

"For promptness and thoroughness, as well as ease of action, no remedy seems to take the place of Cascara Sagrada in the treatment of hæmorrhoids."—*Pacific Record.*

An inferior substitute for a remedy prescribed may be the undoing of your patient. Your own reputation may suffer. Why not see to it that no one ventures to interpose his judgment or profit between you and your patient?

"The right of Cascara Sagrada to a prominent position in the ranks of our advancing therapeutical science, as a remedy *par excellence* for chronic constipation, no longer admits of argument."—PROFESSOR J. E. CLARK, M.D.

"I feel that Cascara Sagrada should be kept prominently before the profession as a great and never-failing remedy for constipation and those diseases of the system which depend upon a constipated condition of the bowels, lack of secretory action, etc. *I have had no failures with Cascara Sagrada where the article was a genuine one. I warn the profession against spurious and cheap preparations.*" —W. R. ALEXANDER, M.D., in *Therapeutic Gazette.*

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Gleanings.

Dandruff.—Applied to the scalp every day or two, Eucalyptus and Thymol Antiseptic is said to be a reliable cure for dandruff.

The Physician's Motto: "An honest druggist *will* not substitute—a dishonest druggist *must* not!"

For Nasal Catarrh.—

℞ Eucalyptus and Thymol Antiseptic (P., D. & Co.), 1 ounce.
Alum, 1 drachm.
Water, 1 pint.

Use as a douche.

Dr. Leoni (*Gazzetta Degli Ospitali*) has tested the extract of *Syzygium jambolanum* (jambul) seeds in four cases of diabetes mellitus, and reports that the drug contains an active principle which, while not specific, is yet capable of neutralizing the diabetic process in individual cases.

Literature and sample furnished on request.

More care is shown by the average man in buying a cravat than by the average physician in specifying the brand of remedies to be dispensed on his prescriptions.

A Vehicle for Iron Salts.—

℞ Cit. iron and quinine, ʒ ij.
Cascara Cordial (P., D. & Co.), } ää ʒ iss.
Water, }

—Dr. Charles Haddock.

Offensive Odor of the Breath may be overcome by the habitual use of Eucalyptus and Thymol Antiseptic. Add a teaspoonful to a tumblerful of water for a mouth-wash and gargle. For bad breath caused by gaseous eructations of indigestion, Eucalyptus and Thymol Antiseptic is an excellent remedy, in doses of twenty to thirty drops in a little water.

"**One fruitful cause** of failure is that imitations of the genuine article are palmed off by designing parties as the true Cascara Sagrada."—Ray R. Mitchell, M.D., in *Therapeutic Gazette*.

For Gonorrhœa.—

℞ Eucalyptus and Thymol Antiseptic (P., D. & Co.), 2 ounces.
Water, 6 ounces.

M. Sig: Use as an injection three times daily.

Glycerin Enemata in Labor.—Dr. Anacker, of Chateau-Salins, strongly recommends the practice of administering, at the beginning of labor, a glycerin suppository or a few grammes of pure glycerin. He finds that the uterine contractions are thus greatly strengthened, and that labor proceeds with considerable rapidity.

Our glycerin suppositories contain 95 per cent. of pure glycerin, and afford a convenient substitute for glycerin enemata.

Dr. Thomas Russell, Professor of Materia Medica, Yale Medical School: "It [Cascara Sagrada] is a remedy of great value and should occupy a prominent place in our materia medica."

For Cachexia or Anæmia with Impending Pulmonary Trouble.—

℞ Syr. Trifolium Comp. (P., D. & Co.), f ʒ iij.
Syr. Hematic Hypophos. (P., D. & Co.), f ʒ iij.

M. Sig.: Take two teaspoonfuls after each meal.

Lauder Brunton calculates that 80 to 90 per cent. of all headaches are due to defects of vision (hypermetropia, myopia, astigmatism, disparity in the focal distances of both eyes, deficient power of convergence). Ten per cent. are caused by bad teeth, and about 5 per cent. by affections of the nose, throat, ears or scalp, and other factors. The headache of the first group is usually seated in the forehead, the temples, or the occiput; where the visual power is not the same in both eyes, it frequently attacks the weaker side.

The physician may diagnose and prescribe intelligently—he may labor strenuously on his patient's case. Yet the most conscientious attendance may be frustrated and set at naught by inferior medicines. Guard against such a danger by carefully specifying.

Pill Anti-Constipation, Carson's (P., D. & Co., No. 49).—

Ext. cascara sagrada (P., D. & Co.), } ää 1 gr.
Ext. rhubarb (P., D. & Co.), }
Ext. nux vomica (P., D. & Co.), ¼ grain.
Aloin, ⅓ grain.

Dr. Geo. P. Marner, of Marion, Kansas, writes that he has successfully treated a case of myxœdema with our Desiccated Thyroids: "On Jan. 1st I commenced the treatment, my patient then weighing 170 lbs. She took, for the first two weeks, 5 grains daily; after this, 5 grains every other day. On Feb. 1st she was again weighed, this time weighing 154 lbs. She looks to be five years younger than she did a month ago, and feels almost well. The thyroid treatment is certainly a success. On your label you say, 'Dose from 5 to 10 grs. three times a day.' For my patient this dose would be entirely too large. On account of its disagreeable odor I gave it in capsules."

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In Constipation with Gastric Debility.—

℞ Cascara Cordial (P., D. & Co.), ℥ iiiss.
Fl. ext. rhubarb (P., D. & Co.), } ää ʒ ij.
Dilute nitro-muriatic acid, }

M. Dose, two teaspoonfuls in infusion of quassia.

—Dr. F. E. Stewart.

In a lecture delivered before the Paris Therapeutical Society, M. Patein dwelt on the valuable service rendered by cod-liver oil in tuberculosis of the bones, in scrofula, cachexia, lupus, rachitis, etc., etc. He emphasized the necessity of choosing the light oil, and of refraining from the admixture of other medicaments, excepting creosote. Our Improved Lofoten Cod-Liver Oil represents the finest quality of light oil, and has met with great favor, ever since its introduction, in cases similar to those above enumerated.

"In combating disease—a foe which taxes and often defies every resource of the physician—what folly to leave in doubt the quality or potency of the ammunition! The struggle with human ailment is at best arduous, harassing, dubious—why, then, reduce the chances of success by permitting anyone to place in your hand an untrustworthy weapon?"

In Constipation with Hepatic Torpor.—

℞ Cascara Cordial (P., D. & Co.), ℥ iij.
Fl. ext. wahoo (P., D. & Co.), ʒ j.

M. Dose, two teaspoonfuls.

Extract of Pichi in Urinary Disorders.—Dr. Friedländer, after extended use of fluid extract of pichi in the treatment of gonorrhœa and other urinary diseases, states that he is convinced that it will replace all other drugs, such as copaiba, cubebs, sandalwood-oil, etc, which have been used for these disorders.

We introduced this valuable drug to the medical profession, and shall be pleased to furnish samples for trial, accompanied with the literature which we have collated into our Working Bulletin.

H. M. Field, M.D., in *Therapeutic Gazette:* "My trial of Cascara Sagrada has been attended with such marked success as to draw from me this expression of my high opinion of it."

In Constipation with Excessive Dryness of Stools.—

℞ Cascara Cordial (P., D. & Co.), ℥ iv.
Fl. ext. lobelia (P., D. & Co.), ʒ ij.

M. Dose, two teaspoonfuls.

It needs no prophet to explain why many physicians refrain from the employment of ordinary beers, or stout, as tonic or invigorant remedies. In the first place, many are so adulterated as to render them positively hurtful to a convalescent, for example. Secondly, their nutritive value is insignificant. Maltale, as manufactured by the Mosquera-Julia Food Co., represents a concentrated extract of the best Canadian malt, combined with sufficient Bavarian hops to impart tonic properties and appetizing flavor to the product.

Maltale is a Food, a Tonic, and a Mild Stimulant. It should be administered as nearly ice cold as circumstances will permit.

Ask your druggist to order a supply from his wholesale dealer or from us.

For Cholera Infantum.—

℞ Bismuth subnit., ʒ iss.
Eucalyptus and Thymol Antiseptic (P.. D. & Co.), ℥ ss
Glycerin, ʒ ij.
Chalk mixture, q. s. ft. ℥ ij.

M. Sig.: Teaspoonful every three or four hours.

Specification—prevention of substitution—is the physician's duty to his patient. When an inferior imitation of a standard pharmaceutical product is dispensed on a prescription, and failure results, to whom must the blame be charged? Manifestly, to the physician, principally, for he might readily have prevented the substitution.

Loss of digestive power occurs so rapidly in many of the wines, elixirs, and essences of pepsin now on the market as to render them practically worthless. The ferment is very sensitive and is inevitably destroyed by the common preservatives. Pepsin Cordial is the fruit of long search for a combination in which should be united the qualities of absolute permanency and activity. It is one-third the strength of saccharated pepsin, and may be steadily used without fear that some fine day the digestive power will be found *nil* and the preparation as inert as so much water. The taste is highly agreeable. A teaspoonful or two after meals will help along a laggard or enfeebled digestion. Write for full literature on our complete line of digestive ferments.

For Asthmatic and Other Forms of Spasmodic Cough.—

℞ Fl. ext. yerba santa (P., D. & Co.), 1 ounce.
Fl. ext. Grindelia robusta (P., D. & Co.), 1 ounce.
Syrup of wild cherry (P., D. & Co.), 2 bunces.

M. Sig.: Teaspoonful three or four times a day.

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As a Spray to the membrane of diphtheria, which will act as a solvent:

℞ Olei eucalypti, P., D. & Co., f 3 ij.
Sodii benzoatis, 3 j.
Sodii bicarbonatis, 3 ij.
Glycerini, f ʒ ij.
Aquæ calcis, q. s. ad Oij.

M. Sig.: Apply as a spray to the membranes every half-hour for from three to five minutes at a time.

One of the Fruits of Substitution.—The prescription may call for fluid extract ergot or ergotin; a worthless preparation is put up; this time your case of uterine hæmorrhage is endangered; life may be imperiled because of no remedial effect. In the emergency you are forced to look for other means of relief. There is great risk, a terrible risk; human life hangs in the balance, and because of somebody's turpitude. What a comment on man's inhumanity to man.—*Philadelphia Medical Summary.*

But why blame "somebody's turpitude," when the physician neglects to specify? Druggists are an honest class of men, and will respect the preference of the doctor when he takes the trouble to make it known. Specify Normal Liquid Ergot in cases of uterine hæmorrhage, and life will not be imperiled.

Willard H. Morse, M.D., in *Therapeutic Gazette:* "I can sincerely say that I have never met with a safer remedy than Cascara Sagrada for constipation. . . . It could not be bettered."

Against Habitual Headache.—

Sodium arsenate, } ää ½ grain.
Atropine sulphate, }
Extract aconite (P., D. & Co.), 9 grains.
Powdered cinnamon, a sufficient quantity.

To be made into thirty pills.—Take one to four pills daily. The dose should be diminished if the patient complains of dryness of the throat, mydriasis, feeling of heat, or formication.

Elixir Kola Compound.—Recently has been introduced a new preparation under the title of Elixir Kola Compound, which apparently offers unusual opportunities in the way of a stimulant, stomachic, and anti-dyspeptic nervine and reconstructive. It is made up of kola, coca, celery seed, sugar, flavoring, etc.,—the Black Haw called for by the National Formulary is omitted because of obnoxious flavor and because it adds nothing to the value of the mixture: thus one fluidounce represents forty grains each of kola nut, coca, and celery seed. For the promotion of assimilation, and as a gentle stimulant tonic and reconstructive following continued fevers, this combination will undoubtedly prove most satisfactory; further, it possesses an advantage over other preparations of its class in that it possesses a most palatable flavor.—*Medical Age.*

I. A. Moody, M.D., in *Therapeutic Gazette:* "I will close this paper by merely expressing my ardent wish that members of the profession will not forbear making a test of the merits of Cascara Sagrada."

Diuretic Wine for œdema, general anasarca and dropsy, in cardiac and renal diseases:

℞ Fl. ext. jalap (P., D. & Co.), } ää f 3 iij.
Fl. ext. squill (P., D. & Co.), }
Fl. ext. jaborandi (P., D. & Co.), f ʒ j.
Normal liquid digitalis (P., D. & Co.), ♏ xxx.
Nitrate of potash, pulv., 3 iv.
Angelica wine, Oij.

M. f. s. a. Sig.: One tablespoonful every three hours

An Interesting Case of Myxœdema.—The lecture delivered by Dr. A. J. Meltzer before the German Medical Society of New York City, and published in the *New York Med. Monatsschrift* of April 15th, corroborates the numerous reports on the striking benefits which follow the employment of desiccated thyroids in myxœdema. In the case narrated, and illustrated with photographs, the thyroid treatment proved remarkably effective. Five grains was the daily dose at the outset, one grain being added every fourth day. After prolonged treatment, ten grains every fourth day was found sufficient. An immense improvement in speech and gait has resulted. Patient has lost forty-five pounds of adipose. All the bodily functions manifest a corresponding benefit. Throughout the treatment Parke, Davis & Co.'s Desiccated Thyroids were employed. Dr. Meltzer recommends administration of the remedy in gelatin capsules—a recommendation which we beg leave to endorse.

James M. Hole, M.D., in *Medical Summary:* "I have now treated ten cases of rheumatism with Cascara Sagrada, and with greater success than I ever had in curing ague with quinine."

In Acute Asthma.—

℞ Fl. ext. Grindelia robusta (P., D. & Co.), 1 ounce.
Fl. ext. lobelia (P., D. & Co.), 3 drachms.
Normal liquid belladonna (P., D. & Co.), 1½ drachms.
Potassium iodide, 2½ drachms.
Syrup tolu (P., D. & Co.), q. s. ad 4 ounces.

M. Sig.: Teaspoonful as needed to keep down the attacks.

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Asiatic Pills.—At a meeting of the Vienna Society of Dermatology, Doctor Kaposi advocated the treatment of acute lichen ruber with Asiatic pills. In a case presented the statement was made that improvement only began after the dose had been increased to six pills daily.

Asiatic pills, as listed by Parke, Davis & Co. (number 832), represent each comparatively one-ninth grain arsenous acid, one grain black pepper, one-fourth grain cassia, three-tenths grain marshmallow. They are put up in bottles of 100 only, with poison label, owing to the large amount of arsenic embodied. Several physicians in New York employ these pills also to great extent with most satisfactory results. Correspondence with two of these gentlemen with reference to the size of the dose of arsenic, elicited the statement that small doses of the medicament were practically valueless, and that it should be administered only under the instructions of, and after careful consideration by, the physician.—*Medical Age.*

H. T. Goodwin, M.D., in *Therapeutic Gazette:* "Since writing the article on Cascara Sagrada in Rheumatism, of June 9th last, I have continued the use of this drug with the most gratifying results."

Diuretic Action of Cascara Sagrada.—Mr. Milnes Hey (Hornsey Lane, N.) writes to the *British Medical Journal:* "Some little time ago I noticed after taking some cascara sagrada increased frequency of micturition. I could then find no cause for this. Shortly after I again took this drug, and again noticed the same effect. As I could find no reference to its action as a diuretic, I began to watch its actions on any of my patients who might be taking it, and in the majority of cases I found it to act as a diuretic, a few only not noticing any difference. In one case, a Mr. D. H——, the effect was marked, as the patient himself complained of the number of times during the day he was obliged to urinate. I analyzed his urine, and found it to be quite healthy. On stopping the cascara he ceased to be troubled. One of my medical brethren told me that he also had noticed this same effect of this drug upon himself. The cascara sagrada that I use, and have always used, is the liquid extract of Parke, Davis & Co. I should be interested to hear if this diuretic action has been observed by others."

J. G. Sutton, M.D., in *New Preparations:* "I tried Cascara Sagrada (Parke, Davis & Co.) in a number of cases in which it worked well, and in one case, which was especially interesting to me, it did more than I expected."

Normal Liquid Cannabis Indica in Unpleasant Dreams.—Dr. R. T. Edes, in the *Boston Medical and Surgical Journal,* especially recommends *Cannabis Indica* for the relief of unpleasant dreams, transforming them into those of a more agreeable character.

"The drug should not be given in so-called 'full doses,' that is, not sufficiently large to produce effects obvious to anyone but the patient, and he hardly should be sure of it. For example, if experiments have shown that ten drops of the preparation to be used gives rise, in the average person, to some excitement, rapid talking, laughter, double consciousness, etc., let the dose for the purpose we are considering be, say, six or seven. I have found that a very convenient plan of administration, admitting of varying the dosage, is an alcoholic extract, which may then be dropped in the desired quantity upon a spoonful of granulated sugar.

"I have frequently had occasion to prescribe *Cannabis Indica,* and have found Parke, Davis & Co.'s Normal Liquid always efficient in doses of ten to forty minims. It would undoubtedly give satisfaction in cases like the above-mentioned, where the dreams are known to be habitual and not due to the 'traditional mince pie' or disordered digestion."

I. J. M. Goss, M.D., in *New Preparations:* "I have tried Parke, Davis & Co.'s fluid extract of Cascara Sagrada in a very marked case of dyspepsia and constipation. I have not found any remedy that acts so promptly."

Damiana Therapeutics.—The therapeutics of damiana have progressed beyond the empirical stage to a point where the drug can be prescribed with something like scientific accuracy. In action it is analogous to strychnine on the heart, and more tonic than cascara upon the bowels; it tends to increase peristalsis, and cause one or two soft stools per day; hence it is an effective remedy in the habitual constipation of neurotic subjects, especially those who are victims of sexual perversion. Increased diuresis follows its use, and many cases of irritable bladder and urethra are very greatly benefited. On the whole it acts as a tonic sedative equal, in some cases of functional disturbance, to *Cactus grandiflorus.*

From the above *résumé* it is plain why damiana has proved so efficacious in cases of nerve exhaustion resulting from sexual excesses, and why, far from being a direct

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stimulant of erotic desire, it has been found to act as a sedative to abnormal sexual appetite. In short, it is not a "specific," and its so-called specific action is but the result of its general tonic effect.—*Cleveland Medical Journal.*

Elixir Damiana, Phosphorus, and Nux Vomica (P., D. & Co.): Each fluidounce represents the medicinal virtues of 60 grains damiana, 8 grains nux vomica, $\frac{1}{100}$ grain phosphorus.

Pil. Phosphorus, Nux Vomica, and Damiana (P., D. & Co.):

Phosphorus, $\frac{1}{100}$ grain.
Ext. nux vomica (P., D. & Co), $\frac{1}{8}$ grain.
Ext. damiana (P., D. & Co.), 2 grains.

We manufacture a fluid extract of the leaves; dose, ½ to 1 fluidrachm (2 to 4 Cc.). Also a Pil. Damiana ext., 3 grains; dose, one to three.

It would be difficult to conceive of an antiseptic preparation possessing a wider range of usefulness than our EUCALYPTUS AND THYMOL ANTISEPTIC. By virtue of its non-poisonous, non-irritant and non-escharotic character, it admits of a great variety of applications.

Its exhibition is suggested in surgery; genito-urinary diseases; respiratory diseases; diseases of the digestive system; eye and ear diseases; malarial, typhoid or eruptive fevers; in gynæcology and obstetrics; skin diseases; for vaginal or urethral injections; as an application to venereal and other ulcerations; as a gargle in diphtheria and other throat diseases; for the purification of sloughing tissues; externally in variola and erysipelas; diseases of the scalp; dysentery; gastritis; dyspepsia; and gastric intestinal disorders accompanied by fermentation and flatulence; diarrhœa, etc.

It may be administered internally, externally, hypodermically, as a douche, by spraying, atomization or otherwise.

It is preferable to carbolic acid or iodoform, since it does not emit the disagreeable odor of either, and yet is equally efficient. EUCALYPTUS AND THYMOL ANTISEPTIC does not stain the clothes, and is admirable as a deodorant for foul-smelling discharges, or in cleansing the hands of the physician after surgical operations or in obstetric practice.

There is practically no limit to its application in surgery. Each fluidounce contains:

Boric acid, 10$\frac{1}{2}$ grains.
Menthol, $\frac{5}{64}$ grain.
Oil eucalyptus (P., D. & Co.), ⅓ minim.
Oil wintergreen, $\frac{5}{32}$ minim.
Thymol, $\frac{1}{32}$ grain.
Fl. ext. wild indigo (P., D. & Co.), 1¼ minims.

A Reliable Means for the Ready Preparation of Antiseptic Solutions.—Our ANTISEPTIC TABLETS possess a two-fold advantage over similar products of this character on the market.

1. In accordance with the suggestion of Schede, Miculicze (Jena), Stadfeldt, Gaenzer and Stultz, of Germany, and other noted scientists, we employ citric acid in combination with the corrosive sublimate, thus preventing the precipitation of the mercuric chloride (which would render the solution inert) by the mineral salts frequently contained in the water used.

2. Our ANTISEPTIC TABLETS are triturate tablets and are so readily soluble as to dissolve immediately on contact with the water.

Our ANTISEPTIC TABLETS are of two strengths. The No. 180 are very generally used for the preparation of solutions to be employed in the form of vaginal irrigations, and as a wash in dressing wounds, etc., and contain 1$\frac{1}{10}$ grains of corrosive sublimate with $\frac{1}{100}$ grain of citric acid. The stronger ℞ "B" contain 7$\frac{3}{10}$ grains corrosive sublimate with 3$\frac{1}{8}$ grains of citric acid.

FORMULÆ FOR DESIRABLE ANTISEPTIC SOLUTIONS.

1: 1000—Dissolve 1 tablet No. 180 in 4 fluidounces of water. Or 1 tablet ℞ "B" in 16 fluidounces of water.

1: 2000—Dissolve 1 tablet No. 180 in 8 fluidounces of water. Or 1 tablet ℞ "B" in 32 fluidounces of water.

1: 4000—Dissolve 1 tablet No. 180 in 16 fluidounces of water. Or 1 tablet ℞ "B" in 64 fluidounces of water.

In ordering antiseptic tablets of your drug gist, pray specify Parke, Davis & Co.'s.

For Nervous Dyspepsia.—

Excellent results have attended the employment of the following:

℞ Sodii bromidi, ʒ j.
Pepsin sacch. (P., D. & Co.), } ää ʒ iij.
Liq. carb. pulv., }
Aquæ, ʒ iv.

M. Sig.: A teaspoonful three times a day, in water, after meals.

Syrup Acid Hydriodic.—A reliable preparation should be perfectly clear, or of a very slightly tinted straw-color; sweet to the taste and not irritating; without acrid odor; absence of iodine reaction with starch; absence of fermentation; syrupy in consistence. Dark-brown preparations are worthless, unsatisfactory, irritating, nauseating and dangerous, and must be condemned at once. Fermentation destroys its efficiency by liberating free iodine and hydriodic acid, which is a gas. Any preparation which has stood

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for a length of time exposed to the air, heat, or strong light, should not be used. Small, dark bottles, hermetically sealed, are preferable to large ones, unless the syrup is used within a short time—this is especially the case in hot weather. It should not be dispensed in large quantities, and is best given in its pure state (to be mixed with water when taken) rather than in combination—combinations are liable to undergo changes more rapidly than the simple syrup.

A large number of failures with syrup of hydriodic acid have been traced by the author to the use of improper preparations. Good syrup hydriodic acid is palatable, does not irritate the stomach, can be given in small bulk, is not objectionable to children, and does not contain objectionable materials. Iodide of potassium makes a nauseous dose, large in bulk, and hard to administer; and potash also irritates the kidneys. Hydriodic acid will produce the same physiological effects as any other preparation of iodine, and will cause coryza, ptyalism, skin eruptions and anæmia if pushed in amount. It is indicated in tertiary syphilis in all its forms; in strumous diathesis and its various manifestations; rheumatism; eczema—in fact, it is to be used internally as any other iodide.—Dr. W. B. Stewart, in *American Therapist*.

Our Syrup Hydriodic Acid contains one per cent. of hydriodic acid, thus corresponding to the U. S. P. requirements.

The small percentage of hydriodic acid in the official syrup sometimes renders it necessary to give an objectionably large dose of *syrup*, though only a small dose of the *acid* may be needed. Frequent complaint on this score has prompted us to offer the medical profession a permanent Syrup Hydriodic Acid of *double strength* (*2 per cent.*) which can be prescribed when a preparation stronger than the official one is desired.

Grindelia Robusta in Asthma.—Jasiewicz corroborates the results obtained by many American investigators, and advocates the use of this drug in nervous affections of the respiratory organs, such as asthma, laryngismus stridulus, etc.

Writing to a well known pharmaceutical journal, Mr. Frank Edel makes the following statement *à propos* of the official fluid extract:

"In making fluid extract of *Grindelia robusta*, the great majority of the manufacturing pharmacists use the menstruum of the U. S. P. This produces an extract abounding in resinous extractive, and which becomes unsightly and musky when added to water. Two of the leading manufacturers make what is known as an 'alkaline extract,' which mixes freely with water, and which is equally as effective therapeutically. I have seen a number of cases of rhus poisoning where the U. S. P. extract had no effect, whilst they yielded readily to the alkaline extract."

With respect to the official formula for the fluid extract, we were not slow to perceive the disadvantages of an alcoholic menstruum in our introduction of *Grindelia robusta* years ago. In one of our early Working Bulletins we stated that our preparation was made in accordance with the suggestion of Dr. W. P. Gibbons, who was the first to call the attention of physicians to this remedy. He declared that alcoholic preparations of Grindelia did not produce the therapeutic effects in asthma, bronchial affections, pertussis, rhus poisoning, etc., which he constantly obtained when the drug was extracted with an alkaline aqueous menstruum.

Our fluid extract can be combined with syrups and aqueous fluids without precipitation—an obvious advantage.

We were gratified by the recognition accorded us as introducers when the drug became official, and we trust that the next edition of the U. S. P. will further honor us by the adoption of a process which we have long employed and which is much superior to the official method of production.

Our Working Bulletin contains a full summary of the literature which has thus far appeared on the physiology and therapeutics of *Grindelia robusta*. Since its first employment the drug has come to be regarded as almost a specific in the distressing maladies to which its application is recommended above.

Dr. W. W. Keen, of Philadelphia, in the *Therapeutic Gazette:* "After considerable experience, I find it [Johnston's Ethereal Antiseptic Soap] the best preparation I know of for cleaning and softening, or for destroying odors about the hands. I use Ethereal Antiseptic Soap constantly in the clinic and in my office, with great advantage."

Dr. J. Abbott Cantrell, of Philadelphia, declares of Ethereal Antiseptic Soap: "As a disinfectant cleanser, I have never seen its equal." He also employed it most effectively in a case of ringworm. "One side of the face was nearly covered with the disease, which had worked around under the eye to the upper part of the nose, including the space between (and involving to some extent) the eyebrows; it was fast encroaching upon the lids. In four days the man was well."

Dr. W. D. Miller, in *Cosmos*, declares:

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"Where there is the least suspicion of specific or pathogenic micro-organisms, it is a duty one owes to himself as well as his patient to thoroughly sterilize his hands." As a cleanser, Dr. Miller has adopted Johnston's Ethereal Antiseptic Soap, because: "It is superior, . . . no odor remains, and after its use the hands have a soft, velvety feeling. Unlike other soaps, mercuric-chloride solution can be added, if desired, but the preparation itself is a good antiseptic."

Dr. A. Hewson, after an experience of sixteen months, declares he has not been able to find anything that will approach it for cleansing prior to an operation, as it combines rapidity and efficiency with the two essentials (ether and soap).

What is Johnston's Ethereal Antiseptic Soap? Simply an etherealized hydro-alcoholic solution of Castile soap, devised by Mr. J. Johnston, of the Jefferson Medical College Hospital, Philadelphia, and possessing every advantage claimed for other antiseptic fluids, with none of their drawbacks. It may be removed by either cold or warm water; it is of pleasant odor, and its remarkable cleansing power recommends it as a general toilet soap, especially where grease is to be removed.

NOTE.—Exposure to cold will result in the formation of a slight precipitate, which will disappear upon the occasional agitation of the liquid in a warm atmosphere.

Dr. Edwin Le Fevre, of Sidney, Ohio, in the *Cincinnati Lancet-Clinic*, Dec. 2, 1893, recommends Johnston's Ethereal Antiseptic Soap (P., D. & Co.) for cleansing the upper arm as a preliminary to vaccination.

Johnston's Ethereal Antiseptic Soap is put up in pint and half-gallon bottles.

Quackery has too long run rampant in the fertile field of "blood-purifiers," "syphilis-specifics," etc., etc. An ethical preparation, devoid of secrecy or copyright protection, *not advertised to the public*, and possessing uncommon alterative virtues, attested and affirmed by a large number of reputable medical men in the leading journals, is to be found nowhere save in our Syrup Trifolium Compound. We publish its formula. Each fluidounce represents:

Red clover, 32 grains.
Stillingia, 16 grains.
Berberis aquifolium, 16 grains.
Prickly-ash bark, 4 grains.
Burdock root, 16 grains.
Poke root, 16 grains.
Cascara amarga, 16 grains.
Potassium iodide, 8 grains.

We cannot here pretend to give even a summary of the gratifying results which Syrup Trifolium Compound has yielded in the treatment of syphilis, scrofula, ulcer, eczema, and all morbid conditions demanding the application of alteratives. Administered to patients with sluggish circulation, constipation, anorexia, cold extremities, flabby muscles and general malaise, its tonic action is strikingly manifested. We venture to cite a few of the many reports on Syrup Trifolium Compound which are collated in our Working Bulletin:

A. Crull, M.D., in *Medical Age*, is "of the opinion that it is not only an efficient remedy in secondary syphilis, but its beneficial action will show itself in many other cases in which an alterative is indicated."

Dr. H. C. Rogers asserts in the *New York Medical Journal:* "From my experience with Syrup Trifolium Compound (Parke, Davis & Co.) in a great variety of cases, and from the very satisfactory results which I have obtained from its use, I am of the opinion that it is destined to occupy a high position among our therapeutic resources."

J. J. Garver, M.D., in *Medical Age:* "I have had splendid success in several other cases with Syrup Trifolium Compound alone. It is an excellent vegetable alterative, and in combination with iodide of potassium it acts marvelously in specific disease."

Hiram Barber, M.D., for eight years in professional charge of Sing Sing prison, with ample opportunity to test the virtues of Syrup Trifolium Compound in syphilitic disease, states (*Medical Age*) that its administration has been attended "with results entirely satisfactory."

Syrup Trifolium Compound may be combined with corrosive sublimate or potassium iodide in cases requiring specific treatment.

IN EARLY SYPHILIS.

℞ Corrosive sublimate, 1 grain.
Syr. Trifolium Comp. (P., D. & Co.), 8 ounces.
M. Sig.: Teaspoonful t. i. d.

IN GUMMA OR TERTIARY SYPHILIS.

℞ Potassium iodide, 1 ounce.
Water, q. s.

Make saturated solution, and take ten drops t. i. d. in teaspoonful of Syrup Trifolium Comp. (P., D. & Co.), added to a wineglass of water, increasing the dose as required.

IN BUBOES AND SUPPURATING GLANDS.

℞ Calcium sulphide, 16 grains.
Potassium iodide, 1 ounce.
Syr. Trifolium Comp. (P., D. & Co.), 8 ounces.
M. Sig.: Teaspoonful increased to dessertspoonful in tumbler of water, t. i. d.

Send for our complete literature. Samples supplied on application.

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THE NEW METHOD

FOR THE

ADMINISTRATION

OF

TOXIC MEDICAMENTS.

Diurnules AND Diurnal Tablet Triturates.

The principle of this new method of Diurnal Medication consists in dividing the FULL DAILY DOSE into 12 small equal doses, one of which is to be administered every two hours.

It is almost impossible for the practitioner to have at finger's end the ordinary minimum and maximum dose of each alkaloid, glucoside and similar active principles.

"AS AN ILLUSTRATION," SAYS DR. E. TROUETTE, "TAKE THE EXAMPLE OF DIGITALIN:

"At the moment of prescribing this substance, one cannot recall exactly the maximum dose in milligrammes which may be given to an adult in 24 hours; one's memory must be very trustworthy to justify the prescription of a dose of 1½ milligrammes; and it is, besides, necessary that chloroformic amorphous digitalin of the Codex be specified, for there are other digitalins—the crystallized digitalin of the Codex, for example, which may not be prescribed without danger in a dose beyond one milligramme. Adding to this the fact that, if the physician specifies nothing, the pharmacist must supply the chloroformic amorphous digitalin of the Codex, what, then, will be the result? Fearing to prescribe a toxic dose, we risk the giving of a quantity inadequate to the purpose in view.

"All physicians are aware that, in order to obtain a rapid and energetic action, it is often necessary to skirt the boundaries of toxicity. A physician cannot possibly, however, have access to his formulary every time he is called upon to prescribe a dangerous medicament; the same hesitation arises at each prescription of a very active substance, unless he confines himself to the use of several drugs comprising his daily routine.

"With this Diurnule method all dangerous medicaments are so divided that, *however toxic*, the maximum dose to be given to an adult in 24 hours shall be exactly divided into 12 doses. For example, the maximum dose of chloroformic amorphous digitalin of the Codex being 1½ milligrammes, the 12 Diurnules together will contain 1½ milligrammes. For crystallized digitalin of the Codex, of which the maximum dose in 24 hours is one milligramme, each Diurnule should contain one-twelfth of one milligramme, in such manner that, if the physician wishes to prescribe the maximum dose to be divided amongst the 24 hours, he will prescribe one Diurnule every 2 hours, or two Diurnules every 4 hours, or three Diurnules every 6 hours, etc. If it be desired at the outset to give the maximum dose, in certain urgent cases which the physician will alone be able to judge, according to the nature of the patient or of the malady, the 12 Diurnules may be prescribed in a single dose.

"There will thus be no inconvenience arising from the voluntary or involuntary substitution of one digitalin for another; the dosage of each being in proportion to its activity, and consisting of one-twelfth the maximum dose, which will always represent the same action.

"The physician will no longer have to exert his memory to recall the maximum dose of such and such a medicament; he will have to remember only the figure 12—the *duodecimal*."

We should be pleased to receive your request for our literature upon this subject, and for samples of both DIURNULES and DIURNAL TABLET TRITURATES.

PARKE, DAVIS & CO.,

DETROIT, - NEW YORK, - KANSAS CITY, - U. S. A.,

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WHENEVER FLUID EXTRACTS OF OUR MANUFACTURE

DIFFER FROM SIMILAR PREPARATIONS

OF OTHER MANUFACTURERS

ONE PINT.

HALF-PINT.

QUARTER-PINT.

We Are Perfectly Willing to Abide by the Result of Clinical Investigation.

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KOLA

(COLA ACUMINATA, *R. Br.*)

OVER 10 YEARS AGO WE INTRODUCED THE FLUID EXTRACT.

PROPERTIES.—Kola resembles in its action guarana and coca, and is said to have almost a specific effect in combating the intoxicating influence of alcohol. It is employed also in diarrhœas, and in all depressed conditions of the nervous system where caffeine is indicated.

A SEASONABLE PREPARATION IS

ELIXIR KOLA COMPOUND,

A STIMULANT, STOMACHIC, AND ANTI-DYSPEPTIC NERVINE.

EACH FLUIDOUNCE REPRESENTS:

Kola.....40 grains.
Coca.....40 grains.
Celery.....40 grains.

In combination with aromatics.

Especially valuable as a gentle stimulant tonic and reconstructive following continued fevers.

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Pepsin Aseptic.

STRENGTH.

Owing to the arbitrary standards of strength adopted by various manufacturers of pepsin, physicians are sometimes confused as to the actual value of a given product. In order to overcome this difficulty and meet the demand for different strengths, we market a line of Aseptic Pepsins in both scale and powdered form, ranging in strength from 1:1000 to 1:15000.

SOLUBILITY.

All are perfectly soluble.

PERMANENCE.

Practically free from peptone, they are not affected by atmospheric influenees and will keep indefinitely.

PURITY.

The absence of odor is the best testimony of their superiority in this particular, they being entirely free from all taint or suspicion of putrefaction.

APPEARANCE.

The scales are bright and clear, while the powdered product is perfectly white. Both are identically the same except in the matter of form.

OUR PEPSINS

we have no hesitancy in pronouncing superior in every particular to similar products now upon the market.

PARKE, DAVIS & CO.,

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(APERIENT SUPPOSITORIES.)

The ACTIVITY of the Glycerin Suppository depends upon the PURITY of the Glycerin and especially its FREEDOM FROM WATER. We offer you Suppositories that in form and size are adapted to either sex, of any age, and are in every way unobjectionable. Each Suppository contains **95%** of PURE ANHYDROUS GLYCERIN.

AN ELIGIBLE METHOD OF RELIEVING CONSTIPATION WITHOUT DISTURBING THE STOMACH.

NEAT. CLEANLY. CONVENIENT. PROMPT IN ACTION. DEVOID OF DANGER.

Many so-called Glycerin Suppositories contain too small a percentage of Glycerin to be efficient. We guarantee the quality of those we manufacture.

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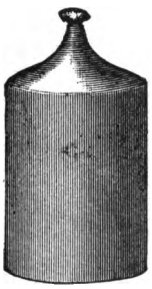
SULPHUR TORCHES.



EACH TORCH CONTAINS ONE POUND OF SULPHUR

The value of sulphur fumigations in contagious diseases is too well understood by the medical profession to require much comment. These SULPHUR TORCHES are easily ignited and will continue to burn until consumed. Especially adapted for the disinfection of rooms in which there have been cases of scarlet fever, diphtheria, etc., etc. Close all openings to the room, place the required number of Torches (still in their containers, which are inflammable) in a group on a large piece of sheet-iron or in a broad iron pan, supported on bricks in such a way that there shall be no danger of fire; light them, and immediately shut the door. The room should be kept closed for twelve hours or more.

They may be readily obtained through the sources by which you are accustomed to be supplied.

PARKE, DAVIS & CO.,

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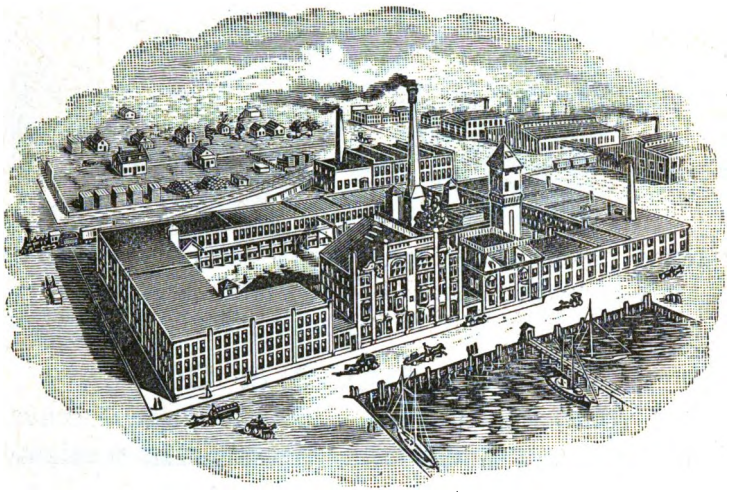

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FLUID EXTRACTS,
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ENTERIC PILLS,
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VETERINARY HYPODERMIC TABLETS,
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OLEATES and GLYCEROLES,
SOLUBLE ELASTIC CAPSULES,
GRANULAR EFFERVESCENT PREPARATIONS and ARTIFICIAL MINERAL-WATER SALTS.

☞In a word, address us with reference to any legitimate pharmaceutical preparation, but not upon topics connected with patented or proprietary articles, non-secret products, and the like, for with such preparations we are not identified.☜

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THERAPEUTIC NOTES.

PUBLISHED BY

PARKE, DAVIS & COMPANY.

VOL. I. DETROIT, JULY, 1894. No 3

PEPSIN CORDIAL

— IN —

INFANTILE DIARRHŒA.

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"I find Pepsin Cordial a most satisfactory remedy in infantile diarrhœa, and all summer complaints due to faulty digestion and an acid condition or ferment in the alimentary canal. In diarrhœa with green acid discharges, in cholera infantum, in nausea and vomiting, its action is culminative and decisive."—CHAS. KELLY GARDNER, M. D.

We offer a sample, together with trial packages of any four preparations advertised in this issue of the Notes, should you not object to the expressage.

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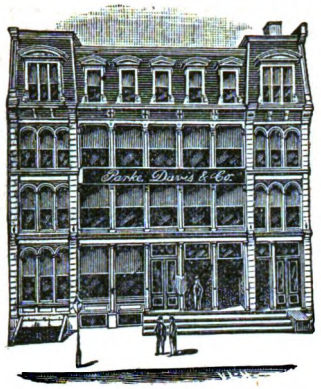

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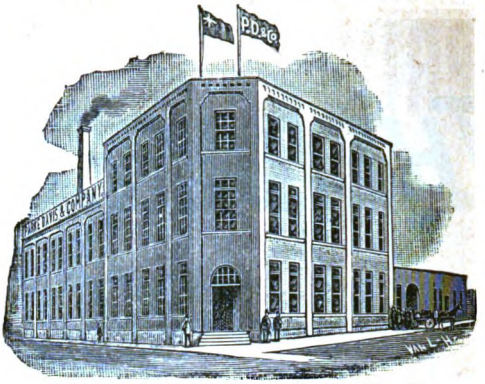

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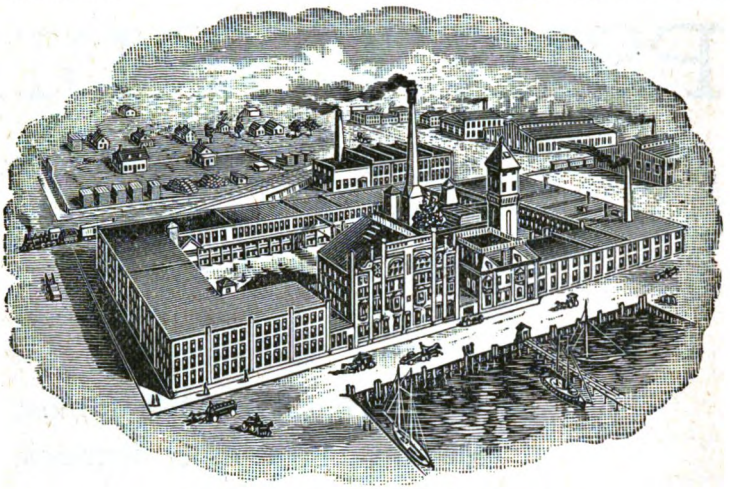

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DETROIT, MICHIGAN, U. S. A.

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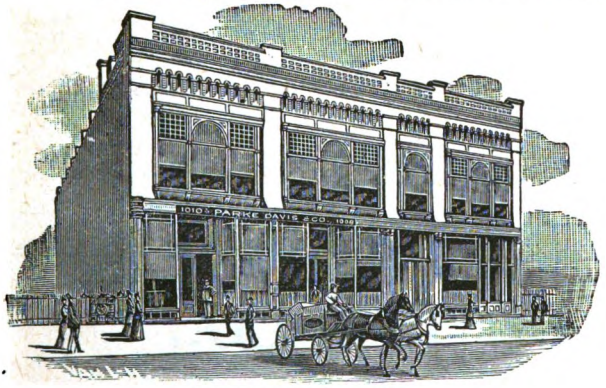
NORMAL LIQUIDS,
SOLID EXTRACTS,
POWDERED EXTRACTS,
PILLS AND GRANULES,
ENTERIC PILLS,

SOLUBLE ELASTIC CAPSULES,
DIURNULES AND
DIURNAL TABLET TRITURATES,
TABLET TRITURATES,
OPHTHALMIC TABLETS,
HYPODERMIC TABLETS,

VETERINARY HYPODERMIC
TABLETS,
COMPRESSED TABLETS,
ELIXIRS, WINES AND SYRUPS,
OLEATES AND GLYCEROLES,
CONCENTRATIONS,

GRANULAR EFFERVESCENT PREPARATIONS AND ARTIFICIAL MINERAL-WATER SALTS.



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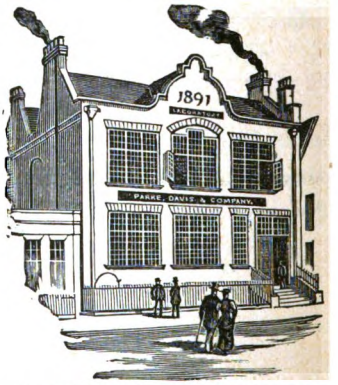

LONDON, ENG., LABORATORY:
34 North Row, Oxford St., Mayfair, W.

CORRESPONDENCE WITH THE HOME OFFICE OR ANY OF ITS BRANCHES RESPECTFULLY SOLICITED.

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PRIVATE ℞ PREPARATIONS.

Possessing, as we do, ample facilities for the manufacture of every description of pharmaceutical preparation, we respectfully solicit correspondence with reference to the manufacture of your

PRIVATE FORMULÆ.

PILLS

We can manufacture in no smaller quantities than 3000 with a sugar coating, or 1000 gelatin-coated.

FILLED CAPSULES

Either hard or elastic, in quantities of 5000 and upwards—5- and 10-minim, and 2½-, 5-, 10- and 15-gramme capacity.

LIQUID PREPARATIONS

Such as Fluid Extracts, Elixirs, Wines, Syrups, etc., we can handle in quantities of three gallons and upwards.

COMPRESSED TABLETS

We can prepare for you in as small lots as 1000, and from ½ grain to 180 grains in weight.

We should also be glad to submit quotations upon the manufacture of

HYPODERMIC TABLETS, TABLET TRITURATES, LOZENGES, SUPPOSITORIES (Uterine and Rectal), BOUGIES and UTERINE PENCILS.

In a word, address us with reference to

ANY LEGITIMATE PHARMACEUTICAL PREPARATION.

Your Private Formulæ will leave our laboratory with a guarantee not only as regards the quality of the ingredients, but, furthermore, that they were manufactured in strict accord with the formulæ submitted.

With formulæ containing quinine you will not find upon analysis that some cheaper alkaloid of cinchona was substituted; or where quinine, 2 grains, was specified, you will not find that only a fractional part of that amount was used. With your pills, for example, it will not be possible for you to sum up the total number of grains according to your formula, and then find upon weighing, with excipient, coating and all, that the weight is not more than should be the weight of the active ingredients alone before being incorporated into the mass. We say this advisedly, for in several instances *where we were underbid* we have had such facts directed to our attention.

Our Prices are not always the lowest, but with our quotations goes the *guarantee* alluded to above, and furthermore **absolute secrecy in connection with your formulæ.**

DROP A CARD FOR OUR BROCHURE ENTITLED "SPECIAL PREPARATIONS."

PARKE, DAVIS & COMPANY,

DETROIT, - NEW YORK, - KANSAS CITY, - U. S. A.,

LONDON, ENG., and WALKERVILLE, ONT.

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CHLOR=ANODYNE

A Combination of Anodynes, Antispasmodics and Carminatives.

A palliative and ofttimes an efficient remedy for Colic, Cholera Morbus, Spasmodic Pains, etc. Of value wherever Antispasmodics or Anodynes are indicated.

Chlor-anodyne is a choice compound possessing superior merits as a remedial agent in diseases for which it is recommended. I have particularly tried it in neuralgia, after other remedies had been given with little or no benefit, and it has acted like a charm, subduing all pain and inducing a quiet placid condition of the system without any of those objectionable conditions following the use of many of our more common anodynes. I think it would be quite difficult to supply its place by any other article, or compound, known to the profession.—A. HARLOW, M. D., in *Therapeutic Gaz.*

Physicians desiring to ensure the use of *chlor-anodyne* upon their prescriptions should write: "*Chlor-anodyne* (*not* chlorodyne)," or better, "*Chlor-anodyne, P. D. & Co.*"

PARKE, DAVIS & CO.,

DETROIT, - NEW YORK, - KANSAS CITY, - U. S. A.,

LONDON, ENG., and WALKERVILLE, ONT.

LIQUOR SEDANS

A UTERO-OVARIAN SEDATIVE AND ANODYNE.

A careful study of medical literature for the past few years and the great importance ascribed by many medical writers, teachers and practitioners to Black Haw (Viburnum Prunifolium) in regulating uterine function; the specific action of Golden-seal (Hydrastis Canadensis) in the catarrhs accompanying uterine irregularity, and the well-known anodyne and sedative value of Jamaica Dogwood (Piscidia Erythrina) and its freedom from the depressing after-effects of opium preparations, suggested to us the propriety of offering a palatable combination of these three remedies.

LIQUOR SEDANS

has been found a most convenient and serviceable combination for a very large class of cases of DYSMENORRHŒA, OVARIAN IRRITABILITY, AND IRREGULARITY OF THE UTERO-OVARIAN FUNCTIONS.

Price, $9.00 per Doz. Pints.

In Half-Gal. Bottles, $5.50 per Gal.

Reports from private and hospital practice, with samples, to physicians willing to defray expressage.

Specify "P., D. & CO."

PARKE, DAVIS & COMPANY,

DETROIT, - NEW YORK, - KANSAS CITY, - U. S. A.,

LONDON, ENG., and WALKERVILLE, ONT.

KOLA

(COLA ACUMINATA, *R. Br.*)

OVER 10 YEARS AGO WE INTRODUCED THE FLUID EXTRACT.

PROPERTIES.—Kola resembles in its action guarana and coca, and is said to have almost a specific effect in combating the intoxicating influence of alcohol. It is employed also in diarrhœas, and in all depressed conditions of the nervous system where caffeine is indicated.

A SEASONABLE PREPARATION IS

ELIXIR KOLA COMPOUND,

A STIMULANT, STOMACHIC, AND ANTI-DYSPEPTIC NERVINE.

EACH FLUIDOUNCE REPRESENTS:

Kola.....40 grains.
Coca.....40 grains.
Celery.....40 grains.

In combination with aromatics.

Especially valuable as a gentle stimulant tonic and reconstructive following continued fevers.

PARKE, DAVIS & CO.,

DETROIT, - NEW YORK, - KANSAS CITY, - U. S. A.,

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FERRATIN

(BOEHRINGER, B. & S.)

The Ferruginous Element of Food.

FERRATIN is not a mechanical mixture of iron or iron salts with other substances, but a chemical combination of iron and an albumen derivative identical with that found naturally in various foods. Professor SCHMIEDEBERG extracted Ferratin from the liver and other organs of animals and found it TO BE IDENTICAL with Ferratin produced synthetically. He further established the fact that the iron necessary for blood-formation is supplied to the body in THIS FORM IN ALL FOOD, both animal and vegetable, also that Ferratin is PRECISELY THAT FORM of organic iron compound which is thoroughly assimilated by the economy.

FERRATIN has been tried in hospitals and in private practice, and REMARKABLE RESULTS have been obtained, especially in cases of ANÆMIA, CHLOROSIS, NERVOUSNESS, during convalescence, TO STIMULATE APPETITE, etc.

POSOLOGY: For children, daily doses of 0.5 to 1 gramme are sufficient; for adults the daily dose may be increased to 1.5 to 2 grammes (20 to 30 grains) divided into two or three portions; to be taken during or after meals. No special attention to diet is required, but it is advisable to avoid acidulous food.

Send for Sample and Literature.

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PARKE, DAVIS & COMPANY,

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THERAPEUTIC NOTES.

VOL. I. DETROIT, MICH., JULY, 1894. No. 3

Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department
PARKE, DAVIS & CO.,
Detroit, Mich., U. S. A.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

Editorial.

"THE NEW IDEA."

ITS ATTACK UPON OUR HOUSE.

It is possible that some of our readers have received copies of a pink blanket-sheet, entitled *The New Idea*, and devoted principally to an abuse of our house. Most physicians are doubtless not aware that *The New Idea* is published by Frederick Stearns & Co., and that the latter are making every effort to assail us. In fact, they have run the entire gamut of abuse, slander, and falsehood, hoping by some means to ruffle a composure which is far more bitter to them than would be a furious counter-attack. How long they will continue their futile effort to disturb our serenity cannot be predicted; but if the reader cares to glance over a brief history of this concern, he will grasp the grounds of its enmity to our firm. He will understand, too, why such attacks can only add to the pride and satisfaction long inspired in us by the rancor of men who vainly hope to regain a long-lost respectability by controversy with a reputable house. "Tell me who hates thee, and I'll tell thee what thou art!"

"Frederick Stearns & Co." was originally the style of a retail drug store in Detroit. At one time the senior partner was a prominent member of the American Pharmaceutical Association; was once, indeed, its presiding officer; and was always a zealous preacher and teacher of ethical conduct on the floor of the A. P. A.

About the time that Stearns *père* was spreading the gospel of righteousness and dignity among pharmacists, he engaged in the introduction of an article called "Sweet Quinine." In this product, quinine was about as plentiful as snakes in Ireland: *it contained no quinine whatever;* it was composed of cinchonine, mixed perhaps with other of the *cheaper* cinchona alkaloids. By speech and by print, Stearns & Co. nevertheless sought to make it appear that "Sweet Quinine" was true quinine salt, rendered palatable by ingenious manipulation.

Bear in mind, dear reader, that quinine was then a costly article, worth fifteen or twenty times as much as the present selling rate. Accordingly, to substitute a cheap salt in a product sold under the false impression made on the purchaser that he was buying true quinine, was indeed a very lucrative speculation. We quote the following declaration made at that time over the signature of Frederick Stearns—the italics are his:

"SWEET QUININE is not *dose for dose*, or *weight for weight*, a cent more [!] costly than the ordinary or bitter sulphate of quinine: on the contrary it is a little *cheaper*. I also affirm that the medical power of the one, dose for dose, is fully equal to that of the other."

We will not call the foregoing declaration a lie—we simply assert that it was regarded as a shame to pharmacy, a disgrace to the A. P. A., and an eternal blemish on the reputation of its author. When the facts became known, Dr. E. R. Squibb promptly introduced a resolution before the A. P. A., then

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meeting in Chicago, expelling Frederick Stearns from membership, and the resolution was adopted by a majority of 62 to 23, honored men like Maisch, Colcord, Markoe, Sheppard, Hoffmann, Squibb and Whitney voting for the expulsion.

Cut off from all pharmaceutical association, branded and dishonored among pharmacists, Stearns & Co. now started out to create a new business, regardless of ethics, of pharmacy, of medicine, or of public welfare. This new inspiration—worthy of the prophet on whom it was bestowed—was the so-called "non-secret business."

The idea was simply this: By costly and energetic advertising, the patent-medicine people had created a large demand for their products. Stearns & Co. now proceeded to ascertain by analysis or conjecture, more or less accurate, the composition of each patent medicine on the market; imitations, as close as possible in taste, color and appearance, would then be prepared; bottles, labels and wrappers would be made to simulate the original patented article as closely as the law would permit. The labels would be printed or lithographed, with a blank space at the bottom, and in this blank Stearns & Co. printed the name of the purchasing druggist who would thus assume responsibility for the results of each sale to the public.

"Why buy Ayer's Cherry Pectoral at $8.00 per dozen?" has always been their cry: "you can purchase non-secret Cherry Pectoral, with your name on the wrapper and label, for $6.00. So you make a larger profit, advertise your store, and create a permanent demand for your own preparation."

Many druggists objected to urging on the customer "something just as good" when a prominent patent medicine was demanded; patent medicines were an evil, to be sure, but their owners were nevertheless entitled to protection in their property rights. Two wrongs do not make a right; and the harm wrought by a patent-medicine man surely does not justify the theft of his advertising and reputation, flimsy as the latter often may be.

So argued many. So argue now many more, who were less scrupulous or more heedless, and allowed themselves at the outset to be deluded by Stearns & Co.'s plausible, oily representations. Druggists now realize that in pushing the sale of a non-secret nostrum they virtually go bail for its medicinal virtues: they guarantee the remedy. And when it fails for some reason—because the combination is worthless, because it has been manufactured from inferior drugs, or because the purchaser has stupidly mistaken his ailment,—the druggist now receives the blame. "He palmed off on me some stuff of his own concoction—next time I shall go where they will give me what I want."

And the doctor, also, resents the non-secret traffic. "My druggist," he reflects, "makes more money on the non-secrets, so he is pushing them;" and from that moment the doctor's favor begins to cool.

The novelty of the non-secret traffic has now worn off; druggists have awakened to the danger and discredit which must result to them; and Stearns & Co. have gained the ill-will of many whom in the past they have used as a tool or catspaw.

Realizing the loss of ground in the field which was peculiarly and infamously their own, Stearns & Co. have been seeking pastures new. Fancying that time had wiped out the Sweet Quinine disgrace and the non-secret stigma, they have attempted of late years to regain the confidence of the medical profession and the patronage of the trade for their general line of pharmaceutical preparations. In this endeavor the same old characteristic methods have been brought into play. First they imitated all our specialties—Syrup Trifolium Compound, Cascara Cordial, and others, which we introduced and for which we created a demand. In our thorough contempt for the concern, their history, their methods and their principles, we have paid no attention to their filching—not even when their drummers began to declare loudly that Cascara Sagrada—*our* special *protégé*—was originally introduced by Stearns & Co.!

Angered by our scornful silence, which we maintained unbroken despite their repeated theft of our preparations, they have more recently essayed another method of provoking an attack from us, from which they might extract the advertising benefit accruing from controversy with an honorable house. In other words, they have seized upon our literature, have distorted and per-

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verted our printed expressions, and have circulated freely every species of falsehood about our house and our ethical policy.

If we here—for the first and last time—break our long silence, it is only to declare that their charges are false; their quotations from our literature garbled, and their intent malicious. Their credibility may be measured by their past record; and the only reply needed to their falsehoods is their own blackened and dishonored history. We shall not sue them for libel, since no credit would accrue to our house from conflict with such a concern. Moreover, their reputation is so besmirched, and our own standing so serenely undisturbed by their attacks, that we have actually suffered no tangible injury, and we could not truthfully lay claim to damages. Stearns & Co. are generally despised by pharmacists and physicians, and their assertions accepted with usurious discount.

Why, then, have we devoted so much space to their unsavory history? Simply because they are circulating their falsehoods widely, and, as business men, we wish to anticipate possible mischief in the few places where our methods and reputation are as yet unknown. This is our apology for the long recital, which we now terminate with an expression of supreme contempt for our traducers, and the assurance that no lapse of time will remove their reputation from the gibbet built by their own disreputable history.

We are satisfied that the foregoing will carry conviction to every reader who knows our house, its standing and its integrity. It is perhaps superfluous to quote here what other business men have had to say in open print about Stearns & Co.; but to anticipate any possible question respecting the true character of this concern, we quote the following emphatic statement made by the National Advertising Co., 114 Nassau street, New York, in an exhaustive work on "America's Advertisers," page 239:

Stearns, Frederick & Co.—The president of this institution is reported to have been a clerk in a drug establishment, and conceived the idea of putting up a line of preparations which he chose to call "non-secret." . . . It is all very well for Mr. Stearns to state that he manufactures "non-secrets which bear the formula upon them," but he is well aware that his business would cease in twenty-four hours were it not for the sale of the substitute goods which the trade takes because it can dispose of them in place of the advertised goods for which the public calls and which the public demands. Such institutions . . . seek to reap the harvest which others have sown at great labor and much expense. Their plan is first to impose upon the cupidity of the dealer and then upon the credulity of the purchaser. They should be discredited by all honest advertisers, and are unhesitatingly denounced by the editors of "America's Advertisers."

IMPORTANT ANNOUNCEMENT.

Medical men have frequently complained in the past of the difficulty experienced by them in obtaining supplies of our pharmaceutical preparations, with special reference to our lines of tablet triturates and compressed tablets.

We desire to announce that the articles mentioned in our price list are readily and speedily obtainable for medical men by any member of the drug trade from the regular distributing centres all over the United States and Canada, where our goods are carried in complete assortment and in ample quantity. Physicians who desire to procure quantities of tablet triturates and compressed tablets (Parke, Davis & Co.) have only to apply to any druggist, and supplies will be furnished them at prices lower than they have ever received in the past from any quarter whatsoever. We have made extensive additions to our facilities for manufacture; are prepared to meet any demand; and have so radically reduced our selling rates of late as to enable the drug trade to supply the wants of the practitioner at prices unprecedentedly low.

We yield place to no manufacturing house in the quality and uniform dosage of our tablets. The materials employed by us in their manufacture are the very best; we have had a long experience in this line of work, and we feel justified in requesting medical men to specify "Parke, Davis & Co." when ordering of the drug trade.

THE ADULTERATION OF COD-LIVER OIL.

The Adulteration Committee of the New York State Pharmaceutical Association has recently submitted a very readable and in-

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teresting report, bearing unmistakable signs of the literary handiwork of Dr. R. G. Eccles, the well known chemist and editor of the *Popular Science News*. Unfortunately the committee had no time to investigate the important subject of cod-liver oil and its adulterations. They accordingly did the next best thing and quoted the report of the Ohio Food Commissioner, Mr. McNeal. The latter declares that examinations of cod-liver oil have "proven that a large amount of it now on the market is adulterated with cotton-seed oil, and many preparations of wine and cod-liver oil have been proven to contain no cod-liver oil whatever."

The readers of THERAPEUTIC NOTES will recall our past criticisms of the so-called wines of cod-liver oil, alleged to contain the "extracted principles" of the oil. In the treatment of impaired nutrition—for which purpose cod-liver oil is administered in the manifold forms of tuberculosis—nothing will take the place of the pure oil—the entire oil. The so-called "wines of cod-liver oil" may, indeed, possess a slight tonic virtue due to the wine or alcohol present; but they are not worthy of a moment's comparison with a preparation such as our Improved Lofoten Cod-Liver Oil, which represents the purest form of the product obtainable.

DAVY CROCKETT'S MOTTO.

"Be sure you're right—then go ahead" is a bit of Texan wisdom which might profit some of our good friends who occasionally write in a complaint that our hypodermic tablets cause irritation or abscess. Such a statement is positively based on error. The mischief in every instance—and we have investigated too many cases not to know whereof we speak—is due to an unclean syringe or to one which has not been rendered properly aseptic.

After each injection the syringe should be carefully washed with water, and then with alcohol. The frequent rusting of the interior bore of the needle may be obviated by invariably rinsing both syringe and needle as soon as possible after use with a mild solution (about 1:1000) of corrosive sublimate, then forcing the liquid out as vigorously as possible before inserting the wire. A wire should invariably be kept in the syringe when not in use; it will generally prevent rusting and clogging of the bore, if the needle be kept clean.

Difference of opinion exists among members of the medical profession concerning the most desirable size for hypodermic needles. Thus, we receive an occasional complaint because ours are either too small or too large. With a view to pleasing the greatest number, we have adopted two sizes which represent a medium between the two extremes. If these are not satisfactory, we can, upon application, with a week or ten days' notice, supply any desired size. A small additional charge, however, would have to be made, and we should prefer not to accept orders for less than one-half dozen needles at a time, as they have to be made to order.

A striking case: One of the leading physicians of Detroit recently declared that our Normal Liquid Ergot caused abscesses. We at once obtained some of our N. L. Ergot from stock, selected a new syringe, and made a number of injections into rabbits. *Not a single abscess followed.* We then sent for the doctor's syringe, injected some of the ergot from the same bottle, and an abscess resulted from the first injection! We reported our experiment to the physician. No further complaint has since reached us. The reader can readily draw his own inferences.

A WELL MERITED REBUKE.

The editor of the *Medical Age* has recently published a timely and vigorous protest against the fad for palatable medication, which in its present extravagance threatens serious mischief to the patient. He declares:

The fad that requires non-bitter and tasteless preparations, instituted to cater to a desire on the part of the patient that everything shall be palatable, seems to have gone to extremes.

We cannot illustrate this better than by speaking of the recent experiments of Dr. Huber in Germany with the active principles of cetraria, calumba, quassia, and wormwood. The results obtained were overwhelming evidence of the fact that the *bitter principles in drugs add materially to the tonic effect by augmenting peristalsis, and chiefly in those*

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portions of the tract in which the intestinal contents are inclined to be impacted. They also tend to induce considerable intestinal hyperæmia.

It is therefore evident that the bitter principles possess specific indications. Thus, for instance, on removing the quassine from the quassia, the latter becomes *practically inert* for either good or evil, whereas on ingestion of the former the tonic effect pertaining to the original drug is obtained with the result of slight promotion of peristalsis. Again, *absinthin excites peristalsis to such a degree that it is almost entitled to be placed among the laxatives.*

The evidence, then, is that the bitter principle of tonics is essential in all cases of gastric and intestinal atony; and this leads us to a thought regarding a comparatively new drug, viz., cascara sagrada.

The original drug was decidedly bitter, but the fashionable fads required that the *amara* principle should be eradicated, which has been done with "pharmaceutical elegance" by the different manufacturers, but manifestly at the expense of the value of the drug, which, less a cathartic than an intestinal tonic, must derive its virtues largely from its influence upon peristalsis, and its stimulant effect where there is gastric and intestinal atony. To-day we have tasteless and aromatic cascaras, elixirs, syrups, and the "Lord knows what" besides, and yet the practitioner administering in the same proportions fails to obtain the same satisfaction as he did from the solid extract or the original bitter fluid extract, from neither of which was the *amara* principle eradicated.

Palatability is a most desirable thing, but the honest manufacturer will never seek to make his preparations palatable by robbing them of the very principles to which they owe their activity and virtue. Activity *plus* palatability should be the manufacturer's motto.

With respect to Cascara Sagrada, we too manufacture a whole line of tasteless and aromatic products; from the former the bitter principle has been removed in part. But we have never asserted these preparations, partly deprived of the bitter principle, to be equal to the old-time bitter fluid or solid extract as a reliable cure for habitual constipation. On the contrary, we have always expressed our misgivings as to the wisdom of tampering with the bitter principle, and have urged our medical friends to use the original fluid extract Cascara Sagrada (P., D. & Co.) save in cases where the patient positively refused to take the medicine on account of the bitterness. We cannot too often remind the physician or pharmacist that the original bitter fluid extract gave Cascara Sagrada its reputation when introduced by us.

A FAIR ILLUSTRATION.

The reader will gain a fair insight into the difficulties and perplexities of manufacturing pharmacy, if he will pause to reflect on the meaning of a recent experience which we here venture to report briefly.

A physician requests us to prepare for him a certain emmenagogue formula in compressed-tablet form. We do so, and receive his complaint that our tablet is too large—much larger than the tablet of similar formula issued by Messrs. Unmentionable & Co. The tablet of U. & Co. weighs six grains; to be true to the published formula it *should weigh not less than twenty grains!* We so inform the doctor. He writes to U. & Co. for information, and receives an evasive reply, which concludes with the assurance that their label shall forthwith be changed! Had not the doctor consulted us after we had filled his order, he would yet be laboring under the notion that we were bunglers and knew not how to make tablets of proper size.

Now, size may be reduced by proper, skillful manipulation, *but not weight.* And when a twenty-grain formula is offered in a six-grain tablet—then mischief is afoot.

These are the delightful little problems which frequently confront us, and make us feel that the Goddess of Justice is asleep on her beat. Under such competition we can simply do our duty, make our goods true to formula,—and extract what comfort we can from conscious rectitude.

THE FRUIT OF LONG STUDY, NOT ACCIDENT.

Ever since Scheffer announced, back in the fifties, the practical utility of pepsin in gastric debility or disease, scientific men have been on the *qui vive* for a means of so treating the proteid-bearing foods as to render them fit for immediate assimilation when introduced

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into the stomach. Practically, pepsin could not be employed for the purpose, since its digestive action always produces an intensely bitter product known as peptone. Manifestly, such nutriment would be repelled by the sufferer on the score of the nauseating taste.

It was the search for some digesting agent which should yield a *sweet* peptone that prompted Señor Vicente Marcano, a distinguished chemist, residing in Caracas, Venezuela, to test certain juices of the vegetable kingdom. Pursuing this line of research, Señor Marcano finally discovered that the juice of the common pineapple possesses an unsuspected digestive principle which is fully capable of dissolving all proteids precisely as does pepsin, and transforming them into a sweet, fragrant peptone, acceptable to the most whimsical palate.

The Mosquera-Julia Food Co., for whom we are the general agents, are now manufacturing a complete line of predigested food products, utilizing the Marcano discovery and subjecting a carefully chosen quality of beef to the action of the pineapple ferment.

Among these highly concentrated, palatable and assimilable products, MOSQUERA'S BEEF JELLY has met with special favor. Unlike the familiar extracts of beef, *which contain absolutely no nutriment*, BEEF JELLY possesses a large proportion of the beef *fibrin*, predigested and ready for immediate absorption without requiring digestive action. The extracts of beef contain only the soluble extractive matter of meat—but no nutritious fibrin. MOSQUERA'S BEEF JELLY contains extractive *plus* fibrin, predigested and palatable.

BEEF JELLY is offered in two forms—solid and fluid. FLUID BEEF JELLY, Mosquera, dissolves instantly in hot or cold water. Two to four teaspoonfuls, added to a cup of ice-water, yield a nourishing beverage which quickly relieves exhaustion. In many cases of illness the hot beverages are disliked and contra-indicated; here FLUID BEEF JELLY will be found most serviceable.

Many cases of summer diarrhœa are due to defective nourishment and impaired nutrition. MOSQUERA'S BEEF JELLY, Fluid or Solid, will render good service under such conditions by supplying the economy with a concentrated and predigested nutriment which is readily assimilated.

PROFESSOR RUSBY'S EXPEDITION, AND THE INTRODUCTION OF PICHI.

The language of warm commendation in which Dr. Daniel sets forth the virtues of Pichi* (*Fabiana imbricata*, R. & P.) recalls the adventurous expedition conducted in 1885 by Dr. H. H. Rusby, now Professor of Botany and Materia Medica in the New York College of Pharmacy.

On January 10, 1885, Dr. Rusby started for South America as our representative on a two-fold mission—the investigation of the native medicinal flora, and a critical study of the different varieties of coca. Koeller had just discovered the anæsthetic properties of the alkaloid, and cocaine was in great demand at enormous prices. Part of Dr. Rusby's mission was to ascertain the most prolific source of the alkaloid, and the place where it could be extracted in crude form to the greatest advantage.

Landing at Colon and crossing the isthmus to Panama, he proceeded down the west coast of South America by steamship. All the countries on the upper portion of the Pacific coast were then in a state of revolution, and most of the ports were blockaded. After a short stay at Guayaquil, he proceeded to Arica, Chili, and thence to La Paz, Bolivia. Establishing his headquarters at this point, the Doctor made a number of excursions into the province of Yungas, the chief centre of the coca production, made a careful study of coca in all its phases, and then proceeded to Valparaiso, Chili.

Dr. Rusby remained a year in and about Valparaiso, and to his sojourn in this region the medical profession are indebted for the valuable tonic, diuretic, and terebinthinate, now so well known as Pichi. The drug stands high in the Chilian materia medica, and was early directed to the Doctor's attention by the commendation of various reputable medical men. Supplies were forthwith dispatched to us, transformed into the fluid extract, and placed at the service of American physicians. The result has been most gratifying, the

*See page 43.

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properties of Pichi in renal and venereal disease receiving a speedy recognition, and the demand steadily increasing.

Two thousand miles of horseback travel on the Pacific coast did not content the Doctor's ardent spirit. From Valparaiso he returned to La Paz, and after a few excursions started on his expedition across the continent—a journey involving four thousand miles of travel by canoe and raft on the Madeira and Amazon rivers, and occupying eleven months.

Months of suffering and danger they were, too. After enduring much hardship and many times escaping narrowly from death, Dr. Rusby finally reached the mouth of the Amazon, and returned to the United States with a rich collection of botanical and other specimens. Our own herbarium has thus been largely enriched, and the medical profession has been the gainer by two South American drugs thus discovered—Pichi and Cocillana (*Guarea*, species undetermined). Samples and complete literature bearing on both remedies we shall be happy to furnish on application.

Constipation with Cardiac Palpitation.

℞ Fl. ext. cascaræ sag. (P., D. & Co.),
Fl. ext. berberis aquifol. (P. D. & Co.), } ää ʒ j.
Elix. simplex,
Tinct. nucis vomicæ, gtt xxiv.
Tinct. digitalis, 3 j.

M. Sig.: Teaspoonful three times a day.

In Hay Asthma.—

℞ Fl. ext. grindeliæ robustæ (P., D. & Co.),
Fl. ext. yerbæ santæ (P., D. & Co.), } ää 3 j.
Aquæ, 3 xj.

M. Sig.: A teaspoonful every twenty minutes till relieved, then at intervals of three hours till cured.

Chlorosis from Menorrhagia.—

℞ Sulphate of iron, 100 grains.
Ext. hydrastis (P., D. & Co.), 100 grains.
Ext. hyoscyamus (P., D. & Co.), 50 grains.

Divide into 100 pills; two to be taken at each meal.

In Gonorrhœa.—

℞ Fl. ext. kava kava (P. D. & Co.),
Fl. ext. yerba santa (P. D. & Co.), } ää 60 Gm.

M. Sig.: One teaspoonful three times a day in milk

Practical Therapeutics.

THE TREATMENT OF INFANTILE DIARRHŒA.*

This is a subject that annually obtains attention, and with little practical result, apparently, so far as prophylaxis and better treatment is concerned, since the measures advocated for the most part are mere repetitions and transmogrifications of the old "classic" methods which demand astringents, opiates, and anti-acids.

In nurslings there is always a primary and normal tendency to looseness of the bowels, owing, first, to the nature of the food ingested, and second, to the fact that the larger intestine, whereby the dejections might be depleted in part of their fluid constituents, are inactive to absorption—digestion and absorption being strictly confined to the stomach and lesser bowel. Digestion in the infant, to a certain extent, is rudimentary; little ptyaline is excreted before the sixth or eighth month after birth; and any food substituted for normal mother's milk that contains starch is necessarily more or less irritative, since the particles of this product pass through the intestines almost untransformed. Herein is the objection to ordinary bottle-feeding, cow's milk included, and artificial foods of all classes.

Every non-organic and non-specific diarrhœa, reflex causes excluded, no matter what the inciting factor—whether heat, cold, improper nutriment, bacteria, ptomaines, etc.—obtains only with the *sine qua non* of suppression of digestive activity.

Diarrhœa, regardless of inception, is neither more or less than a flux established by Nature in an attempt to rid the economy of some effete, irritating, or poisonous matter, and primarily is a salutary process that becomes morbid only *by perseverance and extension;* in other words, it is "a good servant," but equally "bad master."

When pathological, it possesses a double significance in that it is not merely depleting the economy alone, but it also saps the source of supply by interfering with the absorption of nourishment. It is now a malady that, practically, at least, "burns the

* Editorial in *Medical Age.*

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candle at both ends," and the accessions of cause may be more rapid than the physiological attempts to remove it.

Admitting a cause which the diarrhœa seeks to mitigate, by what rule of thumb or therapeutical philosophy is the malady to be remedied by efforts that tend to repress the flux to the retention (and absorption) within the economy of the very effete, noxious, and perhaps toxic, factors that are the source of the disturbance, and in the removal of which Nature is engaged?

By what measurement of common sense may the exhibition of an antiseptic, *as such*, be expected to combat a malady dependent upon malnutrition and non-assimilation, since antisepsis is merely the antithetic foe of fermentation and putrefaction, and deals with a product instead of a definite cause? It may mitigate as regards virulence: it may tide over until Nature can recuperate sufficiently to perform her own work: but it can by no stretch of the imagination be considered to remove the cause.

To secure a condition inimical to the diarrhœa, is demanded perfectly healthy digestion and absorption. To retain this condition, or to prevent the accession of diarrhœas, food precisely suited to the powers of the digestive organs must be supplied, and regularly, and moderation insisted upon.

In diarrhœa, as already mentioned, we are concerned first of all with perverted digestion. The nursling receives into its stomach a quantity of milk which is speedily transformed into hard, indigestible curd, that, passing through the intestines, provokes irritation and inflammation; further we may have retention in part, with resultant fermentation and putrefaction. For this very reason cow's milk and the patented foods are objectionable as nourishment for infants, though so far as the former is concerned the evil may in great measure be mitigated by dilution with water and peptonization.

When the dejections of the infant are freely acid, fatty, yellow, perhaps accompanied with griping, the fault manifestly is lack of intestinal digestion, and pancreatin alone can restore the physiological balance. *Per contra*, if the passages are abundant in curd, it is the stomach that is deficient, and pepsin is demanded. Again, light-colored dejections denote deficiency in biliary products which is always a concomitant of imperfect pancreatic secretion; but if dark and green, there may be an excess of biliary and pancreatic fluid, but lack of gastric digestive activity. These facts must be the guides for the administration of remedies.

In all diarrhœas, then, wherein there is manifest deficiency of intestinal digestion, pancreatin is the remedy of greatest value and utility; but if the stomach is at fault it is evident that pepsin is demanded, in which case, to be effective it should be employed in large doses, fully twice those generally laid down in text-books. Oftentimes, too, the indications are such that both these ferments are desirable, in which case they should never be given together, but pancreatin exhibited invariably before feeding, and in an alkaline medium, and pepsin a few moments after feeding, in an *acid* medium.

Recently we have obtained the best results from such treatment, though it must be admitted in cases of unusual gravity, when collapse threatens, that coto and wild yam are sometimes of value to check the flux, the digestive ferment following to secure proper digestion and nutrition. So long ago as 1856, Joulin and Corvisart* outlined this mode of treatment, and claimed the happiest results therefrom; more recently it was advocated by Trousseau, Pidoux, Barthez, and Rilliet, of France, and Ellis and Davidson of the United Kingdom. Later still, Dr. J. Milner Fothergill† remarked of pepsin: "Its utility in the treatment of imperfect digestion, and diarrhœa in children, is certain." Prof. J. Lewis Smith, Professor of Diseases of Children, Bellevue Hospital Medical College,‡ expresses exactly the same opinion. Prof. Frederick John Farre§ commends pepsin "*very highly in cholera infantum and summer complaints of children.*" And Bartholow declares¶: "Very great success has been attained in the treatment of the *diarrhœa of infants* by pepsin. . . . . The motions will be quickly changed in character, and

*Rev. Med. Chir. de Paris.

†Handbook of Practice, p. 40.

‡*Archives of Pediatrics*, 1866, p. 518.

§Pareiras Materia Medica and Therapeutics, p. 943.

¶Materia Medica and Therapeutics p 68.

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the nutrition of the child improved, by giving it immediately after each supply of food." He further recommends* the employment of peptonized milk or milk gruel for food in these cases, in which he is supported by Wilson Fox,† who considers "pepsin invaluable in gastralgia and all irritative states of intestinal and stomach and mucous membranes."

With such evidence, and with the physiological knowledge that at present obtains, it is evident the digestive ferments are too little studied or employed as a means of combating infantile diarrhœas; further, they are almost invariably employed in too small doses.

Other agents may be employed as occasion demands; but it should be remembered that opium is too uncertain a remedy, since its administration cannot be graduated with sufficient nicety to secure anti-peristalsis without narcosis; moreover, it is never without elements of danger to nurslings.

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Despite twenty-five years of study and extensive use, pepsin yet remains very much of an enigma. We can simply define it as a sort of albuminoid matter, charged with a certain *potential* energy, just as the steel is charged with magnetism.

Some twenty years ago the attention of the medical profession was directed to the practical value of pepsin as an auxiliary to impaired digestion. In those early days it was considered marvelous that such a substance could be produced, capable of digesting artificially *ten to twelve times* its own weight of coagulated albumen. We were among the very first to take in hand the manufacture of the new agent; established a separate department for the production and improvement of digestive ferments; and have uniformly *led* the movement which has now culminated in a wonderful preparation, one single grain of which is capable of digesting twenty-five thousand grains of coagulated egg albumen!

Pepsin of "ye ancient time" was insoluble, malodorous, unsightly, laden with inert, danger-breeding mucus and peptone, and feeble in its digestive properties. The standard modern pepsin is strictly aseptic, freely soluble, sweet to the taste and smell; possesses any desired potency; and may be obtained in the form of beautiful scales, if so desired. We market pepsin of every strength from 1:2000 to 1:25,000; the greatest demand is naturally for the official strength (U. S.P, 1890), 1:3000, and this is furnished unless other potencies are specified.

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In the administration of pepsin for the cure of infantile diarrhœa, the liquid forms of the digestive ferment are universally employed. Hence it may not be amiss to bestow a few words of comment on a line of preparations which too often are utterly devoid of digestive activity.

On several occasions we tested a certain essence of pepsin, only to find that it possessed in a marked degree the property of curdling milk, but exerted little if any proteolytic power. The reason for this was apparent when we observed that the preparation was advertised by its manufacturers as a product from calf rennet, which is rich in the curdling ferment but possesses comparatively little pepsin.

Many of the wines, elixirs and essences of pepsin administered to children are devoid of digestive activity—utterly inert and incapable of dissolving the proteids of the food. And why? Simply because this ferment is so sensitive and so disastrously affected by the ordinary "preservatives." Far from preserving, they speedily destroy the delicate digestive principle.

A liquid pepsin should be permanently active—not feebly or briefly so. We have in our possession parcels of Pepsin Cordial made several years ago; *their digestive powers are absolutely unimpaired, and we guarantee the permanence of this preparation.* And not only to-day, or a month hence, but after years, Pepsin Cordial will exhibit an undiminished proteolytic power.

Its remarkable power: One teaspoonful will dissolve two thousand grains of coagulated egg albumen. It exerts, moreover, a grateful stimulant effect on the peptic glands, exciting a natural secretion of gastric juice.

One teaspoonful will completely curdle two pints of milk, rendering the Cordial most

*Naphey's Medical Therapeutics, p 395.
†Diseases of Children, ii, p. 821.

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useful in the preparation of junket (curds and whey).

There is no need for dwelling on the importance of palatability in a preparation administered largely to infants and young children. In this respect Pepsin Cordial leaves nothing to desire: its taste is very pleasant and inviting, and commends it also to the favor of the physician when dealing with a moody or whimsical dyspeptic who lays much stress on palatability.

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While our Pepsin Cordial is the liquid preparation of the ferment which in our judgment will prove most satisfactory in the treatment of women and children, on the triple score of activity, permanence, and palatability, it must not be supposed that we limit our line of digestives to this product alone. On the contrary, our Digestive Ferment Department is thoroughly equipped for the extensive manufacture of the entire list of digestive agents. Thus we issue every form of saccharated and lactated pepsin; pepsin in scales, pepsin in powder, in elixirs and pills of every popular formula, in compressed tablets, wines, syrups, granular effervescent salts, and pepsin with pancreatin and malt extract.

We have full literature on the incompatibles of pepsin, on its proper administration, on the history of pepsin, and on the strength of the various official and non-official pepsin preparations, which we shall be glad to mail *gratis* on request.

THE TREATMENT OF HEADACHES WHICH FAIL TO YIELD TO COAL-TAR PRODUCTS.*

Ten years ago, before the large number of pain-relieving drugs of the coal-tar group had been introduced into medicine, opium and Indian hemp were our most reliable drugs for the relief of pain in the head. While cannabis indica suffered temporary disuse through the very wide employment of antipyrin and its relatives, there is no doubt that there still remain a number of cases which are benefited by it and in which the coal-tar products fail. Indeed, it is doubtful whether these substances are ever as efficacious in the treatment of true migraine or megrim as is cannabis indica, particularly if at the time of the attack the cannabis indica is combined with full doses of gelsemium. Under these circumstances the best results seem to follow the administration of tincture of cannabis indica in the dose of 5 drops three times a day during the intervals between the attacks, and at the time of the attack to administer from 20 to 30 drops of the tincture, or 5 to 20 drops of the fluid extract of hemp, with 10 to 20 drops of the tincture of gelsemium as soon as the first dimming of vision or other prodromal sign of the attack manifests itself. Naturally, so full a dose of a good preparation of gelsemium very markedly reduces the pulse-force, and many patients who take these doses are forced to lie quiet on their backs in bed or on a sofa until the struggle between the drug and the attack of migraine is over. It is true that much disappointment has existed when cannabis indica has been administered, and that many of the profession have cast it aside, being unable to obtain a pharmaceutical preparation of it which would be therapeutically active. We have used the preparation made by Parke, Davis & Co. for nearly ten years with constantly good results.

A word of caution in regard to the employment of the tincture of gelsemium is also necessary. In those cases which already have a feeble circulation the full doses named are contra-indicated, and we understand that in some of the southwestern portions of the United States a concentrated tincture of gelsemium is frequently dispensed, the dose of which is 1 or 2 minims at the most. Of course we refer in this article to the tincture of gelsemium which is official in the United States Pharmacopœia.

* Editorial in *Therapeutic Gazette.*

THE INTERESTING HISTORY OF A REMARKABLE REMEDY.

An atmosphere of Oriental mystery hovers about the introduction by Dr. J. Collis Browne of the remarkable remedy which instantly acquired fame under the meaningless name of Chlorodyne. All we know is that in 1848 Dr. Browne was a member of the medical staff of the British Army; that he was led to

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seek some potent cure for the choleraic troubles which prevailed so widely in India, frequently carrying off hosts of natives and soldiers; that finally he discovered the virtues of a certain remedy and carefully suppressed its composition; and that it has borne the test of almost a half-century without losing its fame as an extraordinary anodyne, antispasmodic, and astringent.

The secrecy in which the composition of the new agent was shrouded, and the almost certain presence therein of powerful narcotic drugs, rendered natural and proper the many attempts that have been made to dispel the mystery and to present an open unprotected formula which ethical physicians need not hesitate to prescribe, and which should possess all the virtues of chlorodyne.

Beyond any question we have accomplished both purposes in the admirable combination given below, which is absolutely unprotected by law or by secrecy in any form. In medicinal virtue CHLOR-ANODYNE—our ethical product—is fully as potent as the original chlorodyne, and acts with truly magical speed and efficacy in diarrhœa, cholera morbus, dysentery, colics, cholera, cramps, renal and neuralgic pains.

We cannot sufficiently emphasize the *promptness* with which CHLOR-ANODYNE (Parke, Davis & Co.) subdues pain and checks the morbid process in the numerous bowel troubles which are inseparable from warm weather. In all this large category of troubles there can be no more doubt of its value than of the anti-malarial virtue of quinine. A vial of CHLOR-ANODYNE should form part of every emergency case. Observe the formula; each fluidounce contains:

Morphine muriate, 2⅞ grains.
Tinct. Cannabis Indica, 46 minims.
Chloroform, 46 minims.
Oil peppermint, 1½ minims.
Tinct. capsicum, 1½ minims.
Hydrocyanic acid (dilute), 9 minims.
Glycerin, 75 minims.
Alcohol, q. s. ad 1 fluidounce.

Adult dose, 15 minims in repeated doses according to the indications.

SCALE OF ADULT DOSES.

As a diaphoretic, 5 to 10 drops (to produce perspiration), in coughs, colds, influenza, etc.

As an anodyne, 5 to 15 drops (to relieve pain), in head and heart affections, and all neuralgic and rheumatic pains.

As an antispasmodic, 10 to 12 drops (to control spasms), in hysteria, rheumatism, gout, delirium tremens, cramps, hæmoptysis, croup, cystic, renal and uterine diseases.

As an astringent, 15 to 30 drops, in cholera, dysentery, diarrhœa, colics, etc.

SCALE OF INFANTILE DOSES.

1 month to 3 months	1 to 2 drops.
3 months to 6 months	2 to 4 "
6 months to 12 months	2 to 5
1 year to 3 years	3 to 6 "
3 years to 5 years	3 to 8 "
5 years to 8 years	4 to 10 "
8 years to 12 years	8 to 12 "
13 years to 16 years	10 to 20 "

The oil of peppermint and tincture of capsicum are powerfully stimulant and readily absorbed. The hydrocyanic acid and chloroform are two of the most potent antispasmodics and sedatives known; both are speedily absorbed. The Indian cannabis notoriously exerts an almost magical influence on the intestinal tract. Finally, we have present in this complex of properties the well known virtues of morphine muriate.

The effects of CHLOR-ANODYNE (Parke, Davis & Co.) are characterized by four phases:

A few moments after taking, a gentle heat is experienced at the stomach, followed by a glow of relief from pain, and later by diaphoresis.

A tranquil, composed state gradually prevails with or without sleep. The distressing subjective symptoms—dread, anxiety, forebodings of collapse—now completely vanish: all apprehension ceases.

A comfortable sleep without coma comes on, allowing the patient to be roused at any moment, and continuing for some time.

The pulse increases from a small, weak, thready, hurried or bounding one, to a full, yielding, elastic, natural sort of one, decreasing in frequency of beats to a beautifully healthy condition.

The medical journals have published numerous reports from practitioners who have thoroughly tested this preparation. Much of the information therein contained has been collated by us and published in the form of a Working Bulletin. Copy will be mailed free on application. Samples of CHLOR-ANODYNE

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(Parke, Davis & Co.) are at the service of any medical man desiring to experiment with this most valuable preparation.

NUCLEIN.*

The term "nuclein" is applied to nitrogen- and phosphorus-bearing organic substances which occur in the animal as well as the vegetable organism, in the seed, and in cells capable of development. Differing in their chemical composition, the nucleins consist substantially of nucleinic acid and a highly complex basic substance (albumen). They are insoluble in alcohol and ether, tolerably soluble in caustic alkalies. They resist peptic digestion, and may thus be separated from most other proteid bodies.

Albumen has hitherto been regarded as the most important part of the living substance, but more recent investigations (with special reference to the very interesting labors of Dr. Vaughan, of Ann Arbor) have shown that the nucleins play an equally important rôle. Blood-serum has long been known to possess bactericidal properties, and for this reason it has been introduced into therapeutics. But serotherapy, owing to the large quantities of liquid necessary to inject, has proved impracticable. Dr. Vaughan has now succeeded in establishing the presence of nuclein in the blood-serum, and has furthermore shown that this nuclein possesses bactericidal properties. The white blood-corpuscles are most probably the source of this nuclein. This fact confirms the so-called "phagocytic theory," developed by Metchnikoff (1884), which teaches that the white corpuscles are the natural defenders against bacterial invasion. Dr. Vaughan further experimented with nucleins obtained from yeast, the spleen, eggs, etc.; all of these he has found to be distinctly bactericidal. In harmony with Vaughan, Professor Kossel of Berlin has recently shown that a 0.5-per-cent. solution of nuclein is capable of destroying in a short time cholera and typhus bacilli. The nucleins are therefore to be regarded as "the defensive proteids" with which the organism combats the pathogenic bacteria; in other words, nuclein is the substance which would stimulate the activity of those organs whose function it is to protect the body against infectious diseases. From this brief exposition it is evident that in nuclein we have a very valuable addition to the materia medica. The experiments made by Dr. Vaughan to determine whether the nucleins can be employed to prevent or to arrest the growth of germs in the animal body, are very promising. The nuclein solution used in these experiments contained about 2 per cent. of yeast nuclein. It may here be mentioned that Dr. Bracker, of Paris, read before the recent International Medical Congress at Rome a long series of observations on the treatment of some infectious diseases by means of injections of sterilized yeast-cultures, the results of which, he states, were extremely favorable. No doubt the results obtained should be attributed to the nuclein in the yeast-cultures. Dr. Aulde declares in the *American Therapist:* "I am prepared to assert that in this phosphorized proteid (nuclein) we have one of the most promising remedies that has ever been offered to the medical profession in the history of its existence."

The precise application of nuclein remains as yet the subject of investigation; it may prove of great value in combating blood diseases, in anæmia, influenzal debility, and notably in infectious diseases (tuberculosis, diphtheria, etc., etc.).

* *Bulletin of Pharmacy*

CLINICAL EXPERIENCE IN THE TREATMENT OF NEUROSES OF THE HEART AND STOMACH.*

BY FRANK P. NORBURY, M.D.

In the study of the neuroses during the past ten years, especially of the heart and stomach, internal medicine has made advances worthy of the progressive clinician's attention.

In a clinical experience with nearly twenty-five hundred new cases of mental and nervous disease, I have been struck with the profound functional alterations encountered in the circulatory apparatus and digestive tract.

A neurosis is merely impaired functional ac-

* Extract from an article read before the Tri-State Medical Society at Kansas City, Mo., April 4, 1894, and published in the *Medical Age.*

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tivity, and there are many forms and degrees of functional impairment. We may have a general impairment, in which case we say that our patient is a neurasthenic, or is suffering from nervous exhaustion; or we may have a purely local exhaustion, in which case we have a neurosis. The pathological basis being the amount of exhaustion, waste of or perverted nervous energy, this is the morbid entity. It is important for us to grasp this principle in considering the neuroses of special organs: fatigue when normal is a rapidly recoverable exhaustion, fatigue when abnormal may be prolonged into neurasthenia.

Over-exertion, over-work, malnutrition and prolonged mental strain are capable of producing the foundation for a more or less prolonged neurosis. Heredity may be a factor.

Again, reflex action underlies certain forms of the neurotic manifestations in disturbed condition of the stomach and heart. The reflex cardialgias and dyspepsias belong to this form.

We must bear in mind what Ewald has said, that neuroses rarely occur singly, but usually in groups, following one another during the course of the malady like a panorama of ever changing scenes. The symptoms are sometimes obscure, but usually well defined, and will be spoken of in special cases.

The treatment is to be considered specially, and again let us remember "the main object of treatment is to cure the primary affection and is not to be directed to single symptoms, however prominent." My clinical experience has been largely with the mixed form of nervous dyspepsia, of which the following case is an illustration:

J. H. T——, æt. 26, mail-carrier, single, poorly nourished; complained of pain in region of stomach, nausea, headache, constipation, loss of appetite. Mental symptoms: introspection, tendency to depression and melancholy, especially when stomach was empty. The local sensations were more aggravated after digestion. He was overworked. There was profound disturbance of innervation; nutrition was suffering; the hyperacidity was intense; the "feeling of goneness," which so expressively describes inhibited sympathetic action of the solar plexus, was present. Upon the whole, here was represented a characteristic nervous dyspeptic. Treatment: Restricted diet, avoiding starchy foods; meats recommended. Enough sodium bromide to relieve the distress of aggravated sympathetic disturbance; as an adjuvant the application of the galvanic current, central galvanization, commencing with three milliamperes, increasing to five milliamperes. For the correction of digestion, elixir pepsin with bismuth. For the constipation, extract of buckthorn bark and fluid hydrastis.

Now for the building-up process, to insure repair of nutritional needs. I have always relied upon strychnine in some form—I prefer and generally use the nitrate. Some four years ago I had Parke, Davis & Company make for me hypodermic tablets for use in such cases, particularly upon the insane, and have been highly gratified with the results. I now use the tablet triturate, excepting, as I say, upon the insane.

The patient before mentioned recovered and has done nicely, but it required seven months to establish the reparative process fully.

Observation of numerous such cases, of which this is an illustration, has confirmed, I believe, the wisdom of the combination of nerve sedatives and tonics with alteratives.

Women are especially prone to such attacks. I have noticed the most profound nutritional disturbances following neurasthenic states of the stomach, and resulting in insanity; hallucinations would be the outcome of the sympathetic affection, and forced feeding be necessary. Death has resulted in some cases. Exhaustion in acute mania is attended with profound disturbances of digestion; general paralytics and epileptics are also subject to this same line of phenomena. The re-establishment of functional activity is what we aim for in such cases, and forced feeding with predigested or easily assimilated foods, malted milk, etc., is useful.

There is often encountered a class of neurasthenics having reflex stomach symptoms which, for the time being, lead to difficulty in diagnosis.

An examination of the urine and fæces will show evidences of defective metabolism—the conditions vary considerably. The fæces contain an excess of urobilin; the urine is concentrated and of small amount—600 to 1000 Cc. in twenty-four hours; there may be an ex-

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cessive excretion of phosphoric acid and a change in the quantitative relation of urea and uric acid. In health this relationship of uric acid to urea is 1 to 45 and 1 to 60; in neurasthenia 1 to 40 to 1 to 30. The presence of excessive uric acid is to be noticed in many cases. When such cases exist it seems to me that we have more vasomotor disturbances both of the stomach and general system. Correction of this condition will often alone effect a cure of the local neurasthenia.

FERRATIN.

Professor Schmiedeberg has published a comprehensive treatise on Ferratin in the *Archiv für Experimentelle Pathologie und Pharmakologie*, volume 33, 1893. He refers to the fact that organic iron combinations of the character of the *Hæmatogen* first produced by Bunge from the yolk of hens' eggs, have shown no prospect of general employment as nutritive or medicinal agents, inasmuch as the content of iron in this substance is too small (0.29 per cent.).

A combination which is far richer in iron was obtained by Prof. Schmiedeberg, collaborating with Pio Marfori, by heating for a considerable time an alkaline solution of iron albuminate. From the solution obtained, the substance is precipitated by acids in the form of a brown flocculent mass.

If the heating of the alkaline solution of iron albuminate be continued long enough, the precipitate formed with the acid is obtained of such a character that after drying it dissolves in alkaline water rapidly without gelatinizing. In this form the iron albuminate derivative obtained *corresponds in all its properties to that stored up in certain animal organs, especially in the liver*, and to this substance Schmiedeberg has applied the name Ferratin.

Ferratin may be regarded as an acid albuminate of iron. It contains about six per cent. of metallic iron in the form of an organic combination.

That the Ferratin stored up in the liver is a kind of reserved quantity of iron for the formation of blood, was shown by Schmiedeberg in his experiments on dogs, whose livers, through feeding with food poor in iron and by repeated blood-depletion, became approximately free from Ferratin.

Toward the stomach, intestines, blood, and kidneys, Ferratin behaves differently from the other iron combinations.

Whereas the common iron salts are known in many cases to produce diarrhœa and other disturbances of the gastric and intestinal functions, through their corrosive properties, Ferratin is perfectly innocuous to the stomach and intestinal canal. Under certain circumstances it may even prove useful by regulating the stools.

When directly injected into the blood, 20 milligrammes of iron per kilo of bodily weight, in the form of iron tartrate, is sufficient to cause the death of a dog, whereas the same quantity of iron in the form of a solution of Ferratin, injected into the blood, remains without noticeable effect.

When injecting the ordinary iron salts into the blood, iron may be shown in the urine after a short time. Of the iron of Ferratin, similarly administered, not the slightest quantity is voided by the kidneys.

Schmiedeberg assumes that the Ferratin plays a direct and special rôle in the nutrition of the tissues, and concludes that it may be employed, on the one hand, as a nutrient for augmenting the content of iron in the foods, and on the other hand as a medicament.

Surprising results have been obtained from administration of Ferratin to anæmic and other subjects whose morbid symptoms were traceable to deficient blood supply; in such conditions the loss of appetite is corrected in a few days, and the weariness and languor vanish after a few weeks.

Dr. A. Jaquet and A. Kündig, assistants at the Basle Medical Clinic, dwell on the salutary action of Ferratin in chlorosis and anæmia (*Corresp.-Blatt für Schweiz. Aerzte*). Prolonged administration gives rise to no unpleasant symptom.

Dose for adults, 0.5 Gm. thrice daily; for children, 0.25 Gm two to three times *pro die*. Ferratin should be administered after meals.

The production of Ferratin from animal organs is scarcely practicable, inasmuch as one swine's liver yields only five to six grammes thereof. It is produced on a large

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scale from egg albumen by the firm of C. F. Boehringer & Sons, of Mannheim. It appears on the market in the form of a reddish-brown powder.

We manufacture tablet triturates of Ferratin, 1 grain; Pil. Ferratin, 2 grains and 4 grains; compressed tablets of Ferratin with chocolate, 0.25 Gm. (about 4 grains) and 0.5 Gm. (about 8 grains). The product itself we supply in ounce vials. Samples for experiment furnished free of charge.

THE TREATMENT OF CYSTITIS AND URETHRITIS.

BY DR. J. W. DANIEL, HOUSTON, TEXAS.*

For some time past I have been using the following prescription, or a modified form of it, in acute and chronic cystitis and urethritis, both in the primary and more advanced stages of the disease:

℞ Salol, 3 grains.
Phenacetin, 1 grain.
Ext. pichi, 3 grains.
Para balsam, 5 grains.

The good results which have followed the administration of salol in certain conditions involving the urinary organs have long been recognized by the profession, and hence will need no comment here.

Phenacetin is added for its analgesic and antiphlogistic properties as well as for its well known antipyretic and anti-rheumatic effects. In the ordinary stages of cystitis, and in gonorrhœa during the inflammatory stages of the disease, the above combination has a charming effect.

In the administration of salol and phenacetin in gonorrhœa we in many instances anticipate one of the most painful complications of the disease, gonorrhœal rheumatism, and, by administering these well known anti-rheumatic remedies in advance of its possible outbreak, avoid this very painful and many times obstinate condition.

In pichi we have a never-failing remedy for cystitis, both in the acute and chronic form. It acts equally well in the primary and more advanced stages of gonorrhœa in doses of one-half to one drachm of the fluid extract every three hours, or in the combination above suggested. I have treated many cases of gonorrhœa with the pichi alone with uniformly good results. A case I recall on account of its very painful nature came to me recently during the acute stage of the disease, this condition rendered more painful by the use of irritating injections suggested by friends of the patient—some of those wonderful three-day cures which are so efficient until they have been used. The penis was very much swollen, the meatus everted and highly inflamed, with great tenderness along the entire urinary passage. Micturition was difficult and painful, his water passing drop by drop. There was considerable fever, and he was nervous and restless.

I directed flannels wrung out of hot water to be applied to the parts constantly, frequently changing so as to insure a uniform degree of heat. I administered fld. ext. pichi in drachm doses every three hours, and gave one-third grain morphia subcutaneously.

This quieted the restlessness and relieved the pain, securing several hours' sleep. In twenty-four hours the inflammatory conditions had so far subsided as to allow the patient to pass his water in a moderately full stream with but very little pain; the fever abated and he had a good night's rest. Two days after—that is, the third day from the administration of the pichi—the discharge, which had been profuse and streaked with blood, became thin and watery, and on the sixth day ceased entirely. After the eighth day the medicine was discontinued, and there was no further trouble. No other drug was given in the case. Injections were not resorted to at all.

Para balsam is an old remedy—antedating history, so to speak. That it is a good one in diseases complicating the urinary apparatus is proven by the tenacity with which the profession has stuck to it; but for its disagreeable effects on the stomach it would stand *par excellence* the remedy for specific urethritis. In this combination salol seems to modify these effects on the stomach, or else the doses are so small that the patient does not notice them.

When, however, I find my patient complaining of tasting the balsam from eructations, following the administration of the drug, I add a drop of the oil of cinnamon to the

* *Times and Register*

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prescription, which completely masks the balsam.

THE ANODYNE AND HYPNOTIC PROPERTIES OF LACTOPHENIN.*

Chemically, lactophenin is distinguished from phenacetin by the substitution of a lactic acid radical for the acetic acid radical; further, by the fact that lactophenin is four times as soluble in water as phenacetin. The former is a white powder, without unpleasant taste. The average dose is 0.6 Gm.; the maximum dose 1 Gm.; the daily dose 3 Gm.

The action of lactophenin is at least as prompt and energetic as that of antipyrin. Apart from the vigorous anodyne action, the remedy possesses sedative and hypnotic properties which are manifested on the administration of a single dose of 1 Gm. The following individual cases have been communicated by Dr. Landowski:

I. Ischias, lasting for five months in a woman who experienced violent pain along the left ischiadicus-root—pain which would radiate and become more violent on pressure. No improvement from various forms of treatment (iodide of iron, methyl chloride, etc.). Antipyrin and sodium salicylate were given repeatedly, but were always ejected by vomiting. Phenacetin was given for a whole month, without results.

Twenty minutes after administering 0.8 Gm. lactophenin the pain ceased. The patient slept for almost an hour, and after awaking could move the left leg without pain. This favorable effect persisted for a whole day, the patient complaining only of a slight languor. By continuing the administration of 0.5 Gm. lactophenin the woman was enabled to go about, the improvement proving permanent, and after several days the patient returned to her occupation.

II. A young woman 21 years of age had been suffering for five months from headaches, occasioned by a round gastric ulcer. Vomiting of blood and of food was overcome by a rigid diet. Gastric and head pains alone persisted and withstood all known remedies. 0.6 Gm. lactophenin quieted the stomach and dispelled the headache. This action manifested itself every time when the recurring headache rendered necessary renewed administration of lactophenin.

III. Woman 38 years of age suffering from migraine, against which antipyrin is without avail; the latter, moreover, is badly borne. Twenty minutes after the administration of 0.6 Gm. lactophenin complete relief supervened.

IV. The same success in the case of a woman 28 years of age, treated at the Polyclinic.

V. Patient 18 years of age, with subacute articular rheumatism, treated with sodium salicylate. She complained of intense pain in the head. The pains disappeared in fifteen minutes after the administration of 0.6 Gm. lactophenin.

VI. Influenza with neuralgic symptoms, headache, etc. 0.6 Gm. lactophenin taken twice daily produced an almost immediate effect. A complete cure followed in three days.

VII. Headache and sleeplessness in Bright's disease. One gramme lactophenin taken at 7 o'clock in the evening produced sleep after the lapse of three-quarters of an hour. The sleep persisted until midnight and then, after a short interruption, until 8 o'clock in the morning. In the urine, no change perceived.

Summarizing his experience with lactophenin, Landowski declares that aside from a slight languor and diaphoresis the remedy is well borne. It possesses excellent anodyne properties in migraine, nervous headache, and rheumatic troubles, as well as in influenzal neuralgias. And these properties are manifested in about twenty minutes after the administration of the agent. The medicament seems destined to take a place by the side of phenacetin and particularly by that of antipyrin. It possesses the desirable properties of both, and an advantage over the latter in that it is well borne by those patients who object to antipyrin.

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Samples of lactophenin we shall be pleased to send free of charge to medical men desiring to test this new anodyne and sedative.

* Abstract of a paper by Dr. Landowski, Ancien-Interne at the Hôtel Dieu, Paris, published in *Comptes Rendus Hebdomadaires des Séances de la Société de Biologie*, and summarizing the results of numerous experiments

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THE MEDICINAL TREATMENT OF CHRONIC GASTRO-INTESTINAL CATARRH ATTENDED BY CONSTIPATION.*

Dr. A. A. Eshner contributes this terse and pointed therapeutic note to a current issue of the Philadelphia *Polyclinic:*

In the treatment of a large number of cases of chronic gastro-intestinal catarrh in which constipation was a more or less prominent symptom, I have found the following modification of a well known formula of much service:

℞ Aloin, gr. iij.
Tinct. belladonnæ,
Tinct. physostigmatis, } ää f 3 ij.
Tinct. nucis vomicæ,
Ext. cascaræ fluid, f 3 vj.
M.

The patient is directed to take, at first, thrice daily before meals, from 20 to 30 drops, according to the degree of obstinacy of the constipation; but the point upon which I lay most stress is that the dose shall be gradually and progressively diminished, *e. g.*, one drop daily. The patient is informed that the point aimed at is the employment of the smallest dose necessary to secure a daily evacuation of the bowels, at the same time encouraging the cultivation of a habit of regularity of bowel-movement. The proportions given may naturally be varied in the individual case. When a bitter tonic seems additionally indicated, I often conjoin sufficient fluid extract of erythroxylon to make a three-ounce mixture. As I have stated, the results from the employment of this combination have been eminently satisfactory.

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[" The employment of the smallest dose necessary to secure a daily evacuation of the bowels " is a point which we have repeatedly urged in all the literature issued by us since we first introduced Cascara Sagrada to the medical profession. The neglect of Dr. Eshner's admonition is unquestionably accountable for many uncured cases of habitual constipation. Exhaustive clinical reports, comprising full method of treatment, are embodied in our Working Bulletin on Cascara Sagrada, which we mail free on application.]

* *American Therapist*

DESICCATED THYROID IN MYXŒDEMA.

In the Philadelphia *Polyclinic* for April 14, 1894, Professor Wharton Sinkler publishes his experience with this new and much-vaunted remedy. After an interesting review of the history of the disease, he narrates a case in which the patient was "marvelously benefited:"

The patient was placed on a careful diet. The starches and sugars were reduced to as small an amount as possible, and she was advised to increase the amount of water which she drank. . . . In September, 1893, she was given Parke, Davis & Co.'s desiccated sheep's thyroid, 5 grains twice a week, for two weeks, after which 5 grains were administered alternate days for one week. There were no unpleasant symptoms from taking the remedy, and at the end of the month a very remarkable change had taken place in her appearance: her face was very much less puffy, the feet and hands were smaller, and the whole body seemed less swollen; her face is very much clearer. She was now told to eat anything, and was ordered the thyroid extract 5 grains daily for one month. . . .

Jan. 15, 1894. The patient states that she has been feeling very well; that the numbness in the left leg has entirely gone, except a slight feeling of numbness in the third toe. She has taken no thyroid extract for six weeks, and she thinks that there is a slight return of the puffiness of the face. She was therefore ordered to resume the use of the thyroid powder, 5 grains daily.

Krauss, in his article above referred to, thinks that in some of these cases suggestion may play some part in the beneficial results which follow the administration of the thyroid extract. In my patient, however, there was no such element, as she had no idea what she was taking, nor did she imagine that any such effect was hoped for by me as followed the administration of the remedy.

Dr. G. P. Marner (*Kansas Medical Journal*, May 26, 1894, page 286) reports on a severe case of myxœdema. We quote his own description of treatment:

On the first day of last January I began the treatment of Mrs. M——, whose history I have already given. She weighed on that day 170 pounds. She began by taking a capsule once a day that contained 5 grains of dried thyroid prepared by Parke, Davis & Co., 15 grains of which contain the

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equivalent of one gland. At the end of the first week she had lost six pounds. She commenced complaining of being very tired; the soreness increased; she could not sleep; temperature rose to 98°, pulse to 92 and in a few days ran up to 112 per minute. It was evident that the dose was too large, so she was directed to miss a capsule every other day, which she did for one week, when she again took one every day until the first day of February, when she was found to weigh 145 pounds and had the appearance of being at least five years younger. About this time the hands and feet desquamated completely, the old coarse cuticle being replaced by a soft skin. From the beginning of the treatment she improved rapidly in every respect, her transformation being so great that her intimate friends can scarcely recognize her.

THE TREATMENT OF WHOOPING-COUGH WITH QUININE.

After sixteen years' experience in treating whooping-cough with all the usual remedies, Dr. P. Baron writes (*Berliner Klinische Wochenschrift*, No. 48), warmly commending the use of quinine. He has used it in about fifty cases. Usually several days elapse before the improvement is marked—in part, no doubt, because much of the medicine is lost through vomiting. Sometimes its good effect is observed in two or three days. When once begun, the improvement makes rapid strides in decreasing the number and the severity of the attacks, even if the dose is diminished and given less frequently. He thinks a cure may be obtained, on an average, in six weeks. No relapse has ever come under his observation in children cured of whooping-cough by the use of quinine.

But while unsurpassed for ordinary whooping-cough, the value of quinine is best appreciated when used for cases where acute affections of the lungs occur. Whether as an antipyretic or as a specific could not be determined, but its action was excellent. In one case, after but a few days' use of quinine, the relatives reported, beaming with joy, that the child, which was suffering with acute disease of the lung, demanded food and played, and that the fever had disappeared.

[Three other severe cases were cured by Dr. Baron, despite the excessive virulence of the disease and the unfavorable surroundings We omit the clinical details.—ED. NOTES.]

No bad result from the quinine was ever noted. He thinks it should be determined whether it could be used as a prophylactic. The single dose is ⅙ grain of the hydrochlorate for each month, and 1½ grains for each year, of the child's age, given three times a day, preferably at 6 A.M. and 2 and 10 P.M. Strong children require a larger dose, but a larger dose than 6½ grains to children over four years is generally not required.—*Therapeutic Gazette.*

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[While we offer quinine in every conceivable pharmaceutical form, we strongly recommend for use with juvenile whooping-cough patients our soluble elastic capsules of quinine sulphate or hydrochlorate. The products are very attractive to the eye, readily swallowed and quickly dissolved, exposing the quinine *in powdered form* to the almost immediate action of the mucous membrane.]

THE USE OF PROPRIETARY OR SECRET REMEDIES BY THE PHYSICIAN.*

BY DR. W. P. BEALL.

If our patients find that we always give Bromidia for sleeplessness, Fellows' Hypophosphites as a tonic, Lactopeptine for indigestion, Platt's Chlorides as a disinfectant, etc., their business sense at once suggests to them to avoid in the future the middleman, *i. e.*, the doctor, and to buy these things directly from the druggist; and thus our incomes are diminished, and, what is much worse, our profession is degraded in the eyes of the public into a mere annex to the drug store, and we become blind distributors of remedies about which we know no more than the manufacturer may choose to tell us. Indeed, this condition of affairs already begins to exist. Everyone of us has had patients come to us for advice who stated that they were already using, or had tried, some one or more of these copyrighted remedies. And the makers of some of these remedies, which

* Extract from a paper read before the Medical Society of Guilford County, N. C., and published in the *North Carolina Medical Journal.*

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were formerly offered only through the medical profession, now boldly offer them, through the secular and religious press, directly to the public. I mention as examples Scott's Emulsion, Hammond's Animal Extracts, Horsford's Acid Phosphates, etc.; and as soon as *we*, by prescribing, have created a sufficient demand for their goods, this example will be followed by many others.

It is manifestly impossible, however desirable it may be, for us to discard at once all of these proprietary remedies, for the list includes some we could ill spare. Some are combinations of well known drugs in more palatable or sightly form than the ordinary druggist, with the means at his disposal, can prepare; and as long as we strive to cure our patients "quickly, safely, and pleasantly," we cannot neglect any means to gain that end. But while we may not be able to crush out the evil entirely, we can do much to abate it.

I know it is very much easier for a tired doctor to write a prescription for a ready-made medicine, accepting without question the claims of its manufacturer; but such a *habit* inevitably limits the growth of our professional knowledge and tends to lower our standing in the eyes of the layman, and is therefore to be avoided.

Let us, instead, study our official Materia Medica more thoroughly, and, selecting therefrom a list of drugs sufficiently large to meet the usual demands of our practice, let us master their *recorded* effects upon the human system, and then, by painstaking observation at the bedside, verify the record, and learn the effects and *limitations* of drugs; for thus only can we become discriminating practitioners.

Let us never forget that our chief reliance in treating disease must ever be the "*Vis Medicatrix Naturæ*," and we will then pay more attention to aiding her efforts by the wise use of nature's remedies—air, rest, diet, and bathing—and will place drugs in the subordinate position they should really occupy.

Let us refuse to use or prescribe any remedy the definite formula of which is not submitted to us for our guidance; any one for which claims are made which we know must be extravagant or misleading; and any one which is offered directly to the patient by either maker or druggist.

Adherence to these suggestions, I think, would very soon greatly lessen the evil under discussion, and in time put all these preparations where they belong—either on the official list or among the regular patent medicines—"a consummation most devoutly to be wished."

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In the discussion which succeeded the reading of Dr. Beall's paper, the following resolution was offered, and carried by a majority of 11 to 3:

Resolved, That the members of the Guilford County (N. C.) Medical Society pledge themselves to abstain rigidly from the use or endorsement of any manufactured drug or medical preparation which is offered directly for sale to the public, or any combination of drugs the definite formula of which is not submitted to our approval, and that we call upon our medical brethren throughout the country to unite in abating this growing evil which threatens our profession, both from an ethical and business point of view.

THE TABLET TRITURATE.*

From the standpoint of the physician who desires to dispense his own medicines, the tablet triturate is undoubtedly a great advantage. Its benefits are known division of quantities, convenience of carriage and dispensing, and to a certain extent an agreeable form of medication.

There are, however, certain objections to tablets, not the least of which is that the market is well stocked with preparations of this class of an inferior quality manufactured by concerns which have no interest in the welfare of the patient or the success of the practitioner—only in the financial emoluments that are to be obtained.

Again, while this mode of division is eminently satisfactory for dried drugs, it carries with it a great amount of uncertainty (except perhaps, under the most careful manipulation) in so far as fluid drugs are concerned. Recently came to our knowledge the fact that tablet triturates supposed to represent one minim each of tincture of aconite were dispensed, and two tablets two hours apart in one instance, and three tablets one hour apart in the other, induced markedly the physiological influence of the drug. Further, we have heard complaints from physicians that tablet triturates supposed to represent a definite quantity often proved inert.

* Editorial in *Medical Age*.

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When is understood the difficulty of manufacturing tablet triturates, the necessity of adding other ingredients in order to secure just the proper cohesion, it will be realized that it is possible to substitute inferior drugs or even less quantities than pretended without any means on the part of the dispenser of detecting the fraud. With such knowledge before us it becomes a matter of query whether tablet triturates really possess the value that theoretically they are supposed to.

Elegant pharmacy is all very well in its way, and undoubtedly a valuable adjunct to the practice of medicine in many instances, but when such elegance is obtained at the expense of solubility, divisibility and activity, it surely behooves the medical man to pause when prescribing and consider all these facts before deciding upon the form in which the drug shall be administered.

* * *

The author of the foregoing is perhaps too severe in charging deliberate fraud, simply because his own experience in the use of tablet triturates has proved unsatisfactory. But certain it is that these goods require no small degree of skill and pharmaceutical knowledge—a lack of which cannot fail to manifest itself in badly made tablets, wanting in permanence, deficient in medicament, or fluctuating in dosage. The manufacture of a good tablet is no easy matter, and the reader cannot too soon rid himself of the illusion that the simplicity of the tablet triturate places its production within reach of every bungler possessing the apparatus.

Hæmorrhoid Ointments.—

(1) Cold cream, ℥ ss.
Tannin, gr. xxx.
Extract of opium (P., D. & Co.), gr. iij.

(2) Lard, ℥ j.
Goulard's cerate, ʒ ij.
Antipyrin, gr. xlv.
Ext. belladonna (P., D. & Co.), } ää gr. xv.
Ext. opium (P., D. & Co.), }

(3) Cacao-butter, ʒ iij.
Milk of almonds, ʒ ij.
Extract of hamamelis (P., D. & Co.), gr. iij.

Chronic Cough with Profuse Expectoration.—

℞ Fl. ext. yerba santa (P., D. & Co.), ʒ iv.
Fl. ext. Pinus canadensis (P., D. & Co.), ʒ iv.
Glycerin or simp. syrup, ℥ iij.
M Sig.: Teaspoonful every three or four hours.

Gleanings.

Injection in Leucorrhœa.—

℞ Eu-Thymol (P., D. & Co.), 1 ounce.
Hot water, 2 pints.
Night and morning.

Phthisical Cough.—

℞ Tinct. opium camphorated (P., D. & Co.), ʒ j.
Syr. wild cherry (P., D. & Co.), ℥ j.
Eu-Thymol (P., D. & Co.), ℥ ss.
Syr. tolu (P., D. & Co.), ℥ ss.

In Impotency from Excessive Indulgence.—

℞ Fl. ext. damiana (P., D. & Co.), ℥ j.
Fl. ext. canthar. (P., D. & Co.), ♏ viij.
Sig.: Teaspoonful every night before retiring.

Esencia de Coca.—Dr. Charles Seller asserts this to be the most useful of "pick-me-ups." Where one is slightly ill and must keep at work—as, for instance, a clergyman who has not sufficient strength to go through his sermon without some aid—it is a valuable remedy.

For Disordered or Torpid Digestion.—Compressed Tablet Digestive, ℞ A, No. 66 (P., D. & Co.):

Pepsin aseptic, 1: 3000 (P., D. & Co.), 1 grain.
Pure pancreatin (P., D. & Co.), 1 grain.
Calcium lactophosphate, 2 grains.

Dose, one to three tablets.

In an abstract of Dr. H. P. Loomis's article on "The Dietetic Treatment of Phthisis," appearing in the *Therapeutic Gazette*, May 15th, p. 344, the editor of that journal attests the great value of Mosquera's Beef Meal and Beef Cacao. We are the exclusive agents for these valuable preparations, and cheerfully furnish samples and complete literature on request.

In Ovarian Neuralgia and Dysmenorrhœa where opiates cannot be tolerated, the following will be found useful:

℞ Ext. belladonnæ (P., D. & Co.), } ää ¼ grain.
Ext. stramonii (P., D. & Co.), }
Ext. hyoscyami (P., D. & Co.) ¼ grain.
Quininæ sulphatis, ½ grain.
M. et ft. pil. No. 1. Dose, one to two pills.

A dialyzed iron which will not gelatinize or freeze is a highly desirable preparation. We make it. Exposure to extreme cold will not injure our product: a lump of ice may form in the bottle, but this can be thawed, and the iron will be just as good as before. To make assurance doubly sure, we shall during the winter continue to issue the Glycerated Dialyzed Iron.

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An Admirable Formula for Habitual Constipation.—Pil. Colocynth Comp., Belladonna and Nux Vomica, No. 207 (P., D. & Co.):

Ext. coloc. comp. (P., D. & Co.), 3 grains.
Ext. belladonna lvs. (P., D. & Co.), ¼ grain.
Ext. nux vomica (P., D. & Co.), ½ grain.

Dose, one pill at bedtime, followed by a second in the morning if necessary.

For Bowel Trouble in Children.—One of our representatives reports that in his territory more than a score of physicians have assured him of the benefit derived from the following combination:

℞ Eu-Thymol (P., D. & Co.), ʒ j.
Elix. lactated pepsin (P., D. & Co.), ʒ iij.

M. Sig.: Teaspoonful immediately after taking food.

Sanguis Bovinus Exsiccatus, or defibrinated bullock's blood (desiccated), has been employed with very promising results in the New York and London hospitals as an aliment and restorative in all wasting diseases. Its proper preparation requires much skill and care. Our Sanguis Bovinus Exsiccatus represents in powdered form the desiccated and defibrinated blood of healthy animals, and *contains the entire proportion of natural or so-called "blood iron."*

For Nasal Catarrh.—

℞ Eu-Thymol, 1 ounce.
Alum, 1 drachm.
Water, 1 pint.

Use as a douche.

Or,

℞ Sodium bicarb., Sodium biborate, āā ʒ ss.
Glycerin, ʒ ij.
Eu-Thymol, ʒ j.
Water, ʒ v.

M. Make solution, and use as a douche.

For Nervous Dyspepsia.—A correction:

℞ Sodii bromidi, ʒ j.
Pepsin sacch. (P., D. & Co.), Liq. carb. pulv., āā ʒ iij.
Aquæ, ʒ iv.

M. Sig.: A teaspoonful three times a day, in water, after meals.

The prescription published last month called for four drachms of water, instead of four ounces. The latter should be used, else the prescription will be very disagreeable to the dispenser and the amount of bromide excessive

Viburnum for Threatened Abortion.—Polak (*New York Journal of Gynæcology and Obstetrics*) advises rest in bed, morphia or opium per rectum, and drachm doses of the fluid extract of *Viburnum prunifolium*, or four-grain doses of the solid extract in pill. Of thirty-two cases treated in this way, none resulted in miscarriage.

Send for free sample of our fluid extract *Viburnum prunifolium.* We offer the drug in various pharmaceutical forms—powdered and solid extract, pill, compressed tablet, etc., etc.

Many cases of summer diarrhœa are due to improper diet and defective nutrition. The system is drained and the energies are greatly depressed. Mosquera's Beef Jelly and Fluid Beef-Jelly correct the evil by supplying the body with concentrated, predigested nutriment, at once nourishing and stimulating. These products are no mere "extracts of beef:" they are concentrated *foods;* they possess all the stimulating properties of beef extract and, *in addition*, the bone- and tissue-forming elements of meat, partly digested and ready for absorption without entailing labor on an enfeebled stomach.

Proper Use of the Sulphur Torch.—Complaints received from persons who have neglected our caution with respect to Sulphur Torches prompt us to quote the following from the printed directions: "Each torch is marketed in a specially prepared box, *in which it should be left while burning.*"

Do not remove the torch from the box. If allowed to remain in the box and lighted, the liquefied sulphur is retained and burns steadily; otherwise the melted sulphur runs down the side, cools, and may extinguish the torch. The wick plays an important part after the sulphur of the torch is once ignited.

Ergot in Migraine.—Large doses of ergot have been found very serviceable in migraine. The best plan is to administer a drachm of the fluid extract or normal liquid (P., D. & Co.) with an equal quantity of the elixir of cinchona, in water, as soon as the premonitory symptoms of the headache are noticed; the patient at the same time is advised to lie down and remain quiet. The dose is repeated after one hour if the headache persists, and again an hour later if necessary. If either of the doses be vomited, a similar quantity should be given per rectum. In several cases of long standing, in which other remedies had failed, ergot has been found to yield prompt relief. The good effect has often proved permanent when intestinal antisepsis was carried out in the intervals.

Cocillana.—The medicinal effects are similar to those of ipecac, viz.: emetic, cathartic, stimulant, relaxant, expectorant, and

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diaphoretic; there is increased secretion from all glands.

In cases of incipient or acute hyperæmia of mucous surfaces without secretion it is directly indicated and acts nicely. Here it is often superior to ipecac in its action. In dry acute bronchitis its effect is a superior one. In pneumonitis involving the bronchial structure, without secretion, it will be found serviceable. In the dry, hoarse, barking variety of winter cough without secretion, so common in cold, damp regions, it can be combined with *Lippia Mexicana*, and such a combination will produce magical effects. Five or ten drops of the fluid extract will be found a proper dose, repeated every two or three hours.—*Chicago Medical Times.*

Treatment of Muscular Rheumatism.—There is a large number of affections better understood clinically than they are pathologically, and notable among these is muscular rheumatism—a condition of soreness of the muscles or of their fibrous sheaths, sometimes also involving the fibrous structure of the joints, and sometimes the peripheral sensory nerves. These symptoms are generally grouped together under the name of myalgia, for which the following prescription has been found most serviceable:

℞ Tinct. ammoniated guaiac,
Fl. ext. black cohosh (P., D. & Co.),
Fl. ext. coca (P., D. & Co.), } ää 1 dr.

When constipation coexists, an equal portion of fluid extract cascara sagrada (P., D. & Co.) is added. The employment of this combination will almost universally afford satisfaction.

More Evidence.—The contention expressed in another column *àpropos* of the bitter fluid extract of Cascara Sagrada and its superior properties, is borne out by a communication received from Dr. John R. Wheless, Centreville, N. C. The Doctor kindly permits us to quote his experience with the various preparations of Cascara Sagrada:

"I find Cascara Sagrada one of the best remedies for constipation that I have ever used. I attribute a great part of my own good health to the use of your Cascara Sagrada, Nux-vomica and Belladonna pills. They act like a charm, as tonic and laxative.

"While I appreciate your Fluid Cascara Sagrada Aromatic, in delicate stomachs, I find no preparation so efficient as the bitter fluid extract; and on the other hand, I find the Cordial very pleasant for babies and children."

The Doctor adds: "I have often obtained very pleasant effects from your Esencia de Calisaya, and always make it a point to prescribe it when quinine cannot be taken."

Infants, and children under ten years of age, bear opium very badly; numerous are the instances on record where two or three drops of the tincture have induced fatal results. Therefore it is a safe rule never to administer to extreme youth except under very exceptional circumstances, and then only after very careful consideration of the individual case. And when it *is* deemed essential to administer an opiate—either to children or to adults—preparations should be sought whereof the strength is definite and regulated by a certain standard—that is to say, assayed for their percentage of morphia alkaloid. Some seem to think they can obviate all danger so far as children are concerned by employing some domestic nostrum—syrup of poppies, and the like—forgetting that these are the most dangerous of all, since they are always uncertain and variable as to strength, even when prepared by the most skilled methods.—*Exchange.*

Commenting on the foregoing, we would respectfully direct the physician's attention to the fact that all our preparations of opium are brought to a fixed standard strength by careful assay, this strength being in each case stated distinctly on the label. This statement, of course, embraces our Tincture Opium Camphorated (paregoric) and Tincture Opium U. S. P. (laudanum).

Danger in Cocaine.—Though cocaine has been known as a valuable agent for some years, the number of so-called secondary or amorphous alkaloids remains yet a subject of doubt to chemists. There are known to be several, and recent researches on the part of Liebermann, Liebreich, and others, prove that one of these amorphous alkaloids, viz., iso-atropyl-cocaine, is a most violent cardiac poison. This alkaloid occurs in coca leaves in very minute quantity, as a rule, but some specimens contain far more than others; its separation is most difficult, and it enjoys the reputation of being the least easily detected of all the coca bases. Even if we were not positive that the secondary bases exhibited a pernicious effect, they must be looked upon as suspicious, and a cocaine demanded from which they are removed. As a matter of fact, we do know that the presence of even small quantities of these amorphous bases is responsible for untoward and seemingly inexplicable results that often follow upon the administration of supposedly pure cocaine preparations.

Recently the editor of the *Medical Age*

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learned of two apparently mysterious deaths which were in reality the result of the use of impure cocaine by dentists for its benumbing effect in the extraction of teeth—in both cases the drug was injected into the gum. In one instance death occurred within a few hours after the teeth were drawn; in the other the lady lingered for about thirty-six hours, and all the resources of the medical art were unable to stimulate a heart that had been fatally poisoned owing to a preponderance of iso-atropyl-cocaine.

Such facts as just cited should prove sufficient to put the practitioner on his guard and induce him to demand a cocaine that is free not only from secondary alkaloids, but from such inorganic substances as sodium, calcium, etc., that are necessarily employed in the process of manufacture.—*Medical Age.*

Our cocaine is absolutely free from the secondary alkaloids; is anhydrous, perfectly pure, soluble, and effective. We list large and small crystals, the solutions in popular demand, cocaine tablets, and cocaine oleate. See page 182 of our price list.

Henceforward the name Eu-Thymol will take the place of the more ponderous and lengthy designation, EUCALYPTUS AND THYMOL ANTISEPTIC, which we have employed in the past. We would impress upon the physician that the new name EU-THYMOL is not copyrighted, nor is the formula protected by patent or secrecy. EU-THYMOL is a strictly ethical antiseptic preparation of the following composition. Each fluidounce contains:

Boric acid, 10½ grains.
Menthol, $\frac{5}{64}$ grain.
Oil eucalyptus, $\frac{5}{8}$ minim.
Oil wintergreen, $\frac{9}{128}$ minim.
Thymol, $\frac{1}{128}$ grain.
Fl. ext. wild indigo, 1¼ minims.

The application of EU-THYMOL in surgery is practically unlimited: it insures perfect antisepsis, and is an excellent dressing for all wounds, whether accidental or operative.

EU-THYMOL is non-poisonous, non-irritant, and non-escharotic. It is adapted to any known method of administration—internal or external, as a douche, by spraying, atomization, etc.

It has a pleasant odor and never stains the clothing. For cleansing the hands and deodorizing foul-smelling discharges, EU-THYMOL is unexcelled. Note the wide range of its usefulness:

Its exhibition is suggested in surgery; genito-urinary diseases; respiratory diseases; diseases of the digestive system; eye and ear diseases; malarial, typhoid or eruptive fevers; in gynæcology and obstetrics; skin diseases; for vaginal or urethral injections; as an application to venereal and other ulcerations; as a gargle in diphtheria and other throat diseases; for the purification of sloughing tissues; externally in variola and erysipelas; diseases of the scalp; dysentery; gastritis; dyspepsia and gastro-intestinal disorders accompanied by fermentation and flatulence; diarrhœa, etc.

A preparation of Iron Chloride which will not corrode the teeth, and which possesses every therapeutic virtue of the old-time tincture, is to be found in the SYRUP OF IRON CHLORIDE devised by Dr. G. W. Weld, of New York City. Of this product the *International Medical Annual* states as follows in its editorial columns:

"Recently *a Syrup of the Chloride of Iron* has been introduced by Dr. G. W. Weld of this city, in which the ferric chloride has no appreciable excess of acid, and in lieu of being an alcoholic preparation the preponderance of sugar overcomes the objections urged against the use of the tincture. The proportion of tincture is 20 drops in each tablespoonful, and this would be the adult dose. [It should be diluted with two or three times its volume of cold water before administration.] It is pleasantly flavored, and is in this respect an admirable and palatable remedial. Dr. Weld recently gave the formula and right for its production to Messrs. Parke, Davis & Co., who are the manufacturers of this special article."

It would be superfluous to dwell at any length on the properties of tincture iron chloride, and its great utility not only in anæmia but also (when given in large doses) in erysipelas, neuralgia, diphtheria, epilepsy, acute rheumatism, and other disorders.

Though the tincture has become a classical remedy, its action on the teeth is very injurious, and this disadvantage cannot be overcome by dilution with water: indeed, the addition of the water actually increases the mischief following the reaction with the lime salts of the teeth.

Dr. Weld's Syrup Iron Chloride has been very thoroughly tested in American and English clinics, with the most satisfactory results: it is non-alcoholic, absolutely harmless to the teeth, and vastly more palatable than the tincture.

The brilliant chief of the New York Board of Health, Dr. Cyrus Edson, says of this product: "I can say that Weld's preparation contains all the advantages *without any of the disadvantages* of the official 'Tinct. Ferri Chloridi.'"

The Sanitary Inspector of the Brooklyn

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Board of Health, Dr. H. B. Bayles, declares: "I had the extreme satisfaction of seeing my patient restored to perfect health, and to learn that the old reliable *Tinct. Ferri Chloridi* had been so modified that its greatest drawback had been removed, and that it was rendered an agreeable preparation."

Dr. A. S. Dana, of New York City, has prescribed Syrup Iron Chloride, Weld, in four cases with gratifying results.

William H. Dwinelle, M.D., President of the Odontological Society, New York City, says: "I desire to thank Dr. Weld most heartily for presenting to us these results of his investigations, and think I speak the sentiments of this Society when I say that he has placed us under great obligation to him."

The celebrated microscopist, Geo. A. Allen, M.D., writes Dr. Weld:

"15 West 37th St., NEW YORK CITY, Dec. 30th, 1891.

'*G. W. Weld, M.D.*

"DEAR SIR:—Permit me to say that I immersed a tooth, with perfect enamel, in the 'Syrup of Iron Chloride,' for a period of two hours, and so far as I can see the enamel has not been affected in the slightest degree.

(Signed) "GEORGE A. ALLEN, M.D."

The distinguished histologist, Charles F. W. Bödecker, M.D., testifies: "I think the results of Dr. Weld's investigations will be appreciated by both the medical and dental professions."

Reynold W. Wilcox, A.M., M.D., Professor of Clinical Medicine in the New York Post-Graduate Medical School and Hospital, in a paper contributed to the *New York Medical Journal*, treats of the difficulty encountered in relieving cases of dysmenorrhœa, ovarian irritability, and irregularity of the utero-ovarian function. He states:

"For the last year I have been experimenting with a preparation known as liquor sedans, manufactured by Parke, Davis & Co., which has the following formula: Hydrastis 60 grains (represented by the white alkaloid), viburnum 60 grains, piscidia 30 grains, to each fluidounce of the preparation. The drugs are combined with aromatics so that the mixture is not unpalatable, and presumably these additions have some therapeutic effect. The cases in which I made use of this formula have been those in which an operation was not possible, either because the patient's consent could not be obtained, or the patient could not be kept under control. Nor have I inserted cases in which local treatment was the most important feature. While all these cases were under observation and reported from time to time, yet none of them had regular local treatment, because, for various reasons, it was not possible."

Professor Wilcox gives a detailed description of each case. Complete cure was effected in a number of instances; in all, marked relief was experienced.

Liquor Sedans (Parke, Davis & Co.) was brought forward by us some years ago as a remedy for the painful uterine and ovarian disorders which have so increased in number of late years, thanks to the vicious conditions of modern life.

While many uterine and ovarian troubles can be remedied only by mechanical means or surgical procedure, perhaps the majority are not sufficiently grave to require operative treatment. Among these latter may be classed many cases of dysmenorrhœa and ovarian hyperæsthesia, for the relief of which the patients resort periodically to alcohol, the narcotics, or some of the much-vaunted nostrums in the market.

A careful study of medical literature for the past few years, and the great importance ascribed by many medical writers, teachers and practitioners to black haw (*Viburnum prunifolium*) in regulating uterine function, the specific action of golden-seal (*Hydrastis canadensis*) in the catarrhs accompanying uterine irregularity, and the well known anodyne and sedative value of Jamaica dogwood (*Piscidia Erythrina*) and its freedom from the depressing after-effects of opium preparations, suggested to us the propriety of offering a palatable combination of these three remedies under the name of Liquor Sedans.

Complete reprint of Professor Wilcox's article will be mailed on request, accompanied with sample of Liquor Sedans for clinical trial.

In addition to the statements of Professor Wilcox we have the assurances of various reputable medical men whose reports have appeared in the medical press.

Charles Kelley Gardner, M.D., Huntington, W. Va., declares*: "Such is my happy success [in violently painful menstruation with anæmia and profuse leucorrhœa] with that grand therapeutic agent Liquor Sedans."

C. C. Perry, M.D., London, Eng., reports to the same journal (Sept. 10, 1891): "Having proved the value of Jamaica dogwood, I determined to try Liquor Sedans, as I considered its combination would certainly have nothing but a beneficial effect. My expectations were more than realized. As a new remedial agent in this country for the treatment of the ordinary class of utero-ovarian troubles, I feel convinced that Liquor Sedans will soon occupy first place in the minds of the medical profession."

**Medical Age.*

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A combination of valuable vegetable alteratives, with 8 grains of Potassium Iodide to the fluidounce. Administered to patients with sluggish circulation, constipation, cold extremities, flabby muscles and general malaise, its tonic action is very manifest.

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The official Tincture Chloride of Iron possesses several objectionable features, particularly its destructive action upon the enamel of the teeth. Syrup of Iron Chloride (Weld) is not injurious to the teeth, and furthermore is without other untoward effects characteristic of the official tincture.

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Dose, as a laxative, 15 to 30 minims (1 to 2 Cc.) three times a day; as a cathartic, 30 to 60 minims (2 to 4 Cc.) morning and evening; as a stomachic, 6 to 15 minims (0.4 to 1 Cc.) four times a day. Specify P., D. & Co., reject all substitutes, and satisfaction will invariably follow.

Per pint, - - - - - - - $1.50.

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In the debilitated conditions in which the preparations of the hypophosphites are usually prescribed, Syrup Hematic Hypophosphites will prove useful.

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Heretofore we have listed Syrup Hydriodic Acid prepared in strict accordance with the U. S. P. requirements, which specify 1 per cent. of absolute Hydriodic Acid. In addition we now offer a syrup containing 2 per cent. of the acid, therefore double the strength of the U. S. P. preparation. It is ofttimes desired to saturate, so to speak, the economy of the patient with the iodide, a procedure which is greatly facilitated by our Syrup Hydriodic Acid, 2 per cent.

Syrup Hydriodic Acid, U. S. P., may be administered by simply diluting one-half the 2-per-cent. preparation.

1-per-cent., in pint bots., - - - per bot. $0.80
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A liquid antiseptic of the widest range of usefulness. Being non-irritant and non-escharotic, it may safely be administered internally as well as externally; and furthermore, hypodermically, as a douche, by spraying, atomization, or otherwise. Equals in antiseptic power Iodoform and Carbolic Acid, and does not possess their objectionable characteristics.

$7.50 per doz. pints. In ½-gal. bottles, per gal. $4.50.

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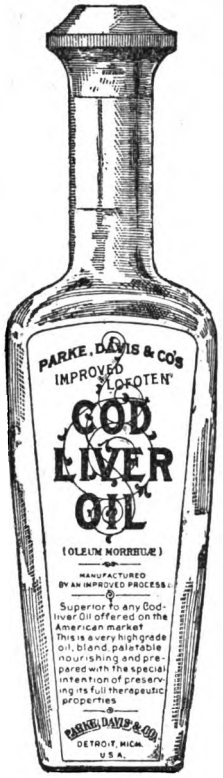

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THERAPEUTIC NOTES.

PUBLISHED BY

PARKE, DAVIS & COMPANY.

VOL. I. DETROIT, MICH., NOVEMBER, 1894. No 4

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THE attempts to secure some "concentrated" or "extracted" representative of cod-liver oil have been legion. With what success? Simply to arouse the derision of physiologists, to disappoint the physician, and to swell the long list of therapeutic failures. The oil---the ENTIRE *oil---is the last word of Science on this subject.*

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represents the first attempt of any pharmaceutical manufacturer to exhibit a palatable form of this remedy and nutrient in its integrity and purity. The serious objection of nauseating taste and almost certain rancidity is here overcome, and furthermore the preparation is guaranteed to possess every virtue ascribed to the oil by science.

SEE SPECIAL OFFER,

ADVERTISING PAGE 4.

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The Physician's province is not invaded by the solicitation of lay custom for our malt products.

A malt extract, properly speaking, is both a nutritive and a digestive—nutritive because of the presence in it of a large percentage of digested starch; and digestive by virtue of the diastase it contains. It should be remembered that in the administration of pre-digested foods the stomach is entirely relieved of the labor ordinarily incident to digestion, and the assimilation of the full quantity of nourishment introduced into the alimentary canal is thus assured. Malt extracts, as regards their digestive power, are valuable or not, according to the care exercised in their manufacture and the amount of diastase which they contain. This, fortunately, is a matter capable of easy determination by estimating the action of a given quantity of any sample upon starch, under conditions similar to those which prevail during natural digestion.

We have devoted much time and study to the subject of digestives and their manufacture, and in introducing to your attention our Malt Extract we do so with the positive knowledge that it is at once a more active digestive and concentrated nutrient than any similar preparation now on the market.

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Please order one-half dozen Improved Lofoten Cod-Liver Oil, P. D. & Co. Your jobber will include for me one stock package.
On the assurance of Messrs. Parke, Davis & Co. that Improved Lofoten Cod-Liver Oil is superior to any cod-liver oil on the American market, I agree to prescribe at least one-half dozen bottles. Very truly yours,

.....*M.D.,*

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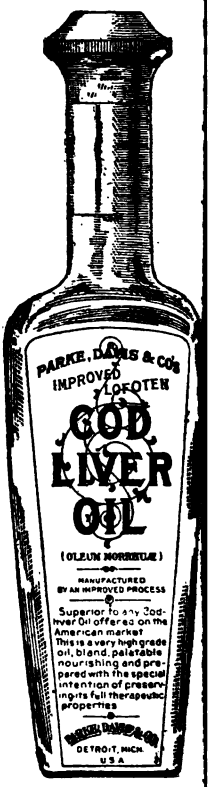

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Dr.....

Very truly yours,

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THERAPEUTIC NOTES.

VOL. 1. DETROIT, MICH., U.S.A., NOVEMBER, 1894. NO. 4.

Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department
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Detroit, Mich., U. S. A.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & CO.]

Editorial.

A REQUEST.

On the advertising page which faces the last columns of reading matter in this journal appears a communication to which we direct the reader's special attention. We shall esteem it a favor if each recipient of the NOTES will peruse this carefully and will act in accordance with the request therein contained.

STRONG CONFIRMATION.

The return of the season when cod-liver oil may be used with benefit in all cases of impaired nutrition, bronchial troubles, pulmonary disease, etc., renders needless any apology for recurring to a subject which has been discussed in a previous issue of THERAPEUTIC NOTES.

Since the appearance of our first nnmber, treating of cod-liver oil therapeutically, chemically, etc., our position with respect to this medicinal agent has been scrutinized by many practitioners; various articles and reports have appeared, and a careful investigation of the subject is now offered in the valuable article by Professor Reynold W. Wilcox, published in a recent number of the *Maryland Medical Journal* and reprinted on page 60 of the NOTES.

From Professor Wilcox's article, from the subjoined comment by the editor of the *Maryland Medical Journal*, and from the numerous assertions of medical men who speak from a long experience, the following truths are clearly manifest:

1. Cod-liver oil is a food, valuable by virtue of its ready assimilation. It should accordingly be exhibited *in its integrity*, without removal of any component element. An extract of cod-liver oil is as rational as would be an extract of porridge or gruel, or the dear departed "Essence of Oats." The *entire* oil must be used. Says the editor of the *Maryland Medical Journal:* "It is sometimes interesting to see how an old and well-tried agent will have successors and substitutes which can never take the place of the original one. Cod-liver oil, in spite of all the improvements in manufacture and preparation, still holds its own, and most men recognize the fact that it is to the oil alone that the good effects are due."

2. Cod-liver oil differs from most foods or nutrients in the fact that it is used by invalids or by the feeble almost exclusively. To fulfill its office *it must be palatable*—it must not offend the taste, the smell, or the sight. Improved Lofoten Cod-liver Oil, P. D. & Co., is a pale, clear product, of bland and pleasant savor, and represents the finest quality of oil as obtained from the fresh livers on the very scene of the famous fisheries. Our Improved Lofoten is suited to *prolonged administration.*

3. As Professor Wilcox makes clear, the so-called "alkaloids" obtained from cod-liver oil are absent from the pure, fresh oil, and represent putrefactive or cadaveric alkaloids—*decomposition products* which it is folly

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to administer. Of their physiological effects, Professor Wilcox declares: "As we read the results of these experiments, we cannot but be impressed by the fact that these symptoms are the symptoms of ptomaine poisoning!"

To all physicians who have been baffled by the nauseating taste, the repelling odor and the gastric disturbance which in the past have rendered cod-liver oil the *bête noir* of delicate invalids, we heartily commend Improved Lofoten, P. D. & Co.

THE BEST TIME FOR ADMINISTERING COD-LIVER OIL.

With the majority of patients it is well to give heed to the suggestion on another page, that the oil be administered during the hight of pancreatic digestion, one to two hours after eating. Others find that the oil is best borne if taken at the close of the meal.

Some have derived greatest satisfaction from administering the oil *during* the repast; food taken after the dose seems in certain instances to prevent eructation completely, and to favor assimilation.

Many subjects become unreasonably prejudiced against cod-liver oil, through lack of proper judgment at the beginning of its use. The first doses should be small, not exceeding a dessertspoonful. At times it is advisable to begin with a single teaspoonful *once* daily, increasing size and frequency of dose as rapidly as the growing toleration will admit.

RATHER FLIMSY.

The representatives of the various tablet-triturate houses are taking great pains to assure physicians that our Migraine tablets (which we sell at prices far lower than those of any other house) do not contain "caffeine citrate," but only "citrated caffeine," whereas *their* tablets contain the "true caffeine citrate." One of our friends in St. Louis was on the point of canceling an order when our representative came on the scene and explained—as follows:

The caffeine used by us in our Migraine tablets is the true "citrated caffeine" of the U. S. Pharmacopœia (Caffeina Citrata, U. S. P.). There is indeed such a salt as citrate of caffeine, but it is almost a chemical curiosity, and is unknown commercially. The product improperly designated by that name in the past was identical with the present citrated caffeine of the new Pharmacopœia. And orders for "citrate of caffeine" have always been filled with the product which we employ. We naturally prefer and use only the pharmacopœial name.

The circulators of the falsehood above quoted are simply attempting to deceive the profession in their vain endeavor to find some excuse, whether fair or foul, for the high prices which they are trying to extort for their tablet formulas.

What is the one logical inference concerning the products and character of houses which stoop to such methods?

AN OLD-TIME DELUSION—BEEF TEA AND BEEF EXTRACT IN THE NOURISHMENT OF THE SICK.

"Many writers," says Dr. Richard Neale in an article appearing in *Food and Sanitation* for June 23, 1894, "have endeavored to impress the public and the profession with the true value of beef tea, viz., that it is not a nutrient but a stimulant, and that it mainly contains excrementitious materials.

"It appears, however, of little avail, for you constantly meet with those, even in the ranks of the profession, who believe beef tea to be really a powerful nutrient, while in most cases among the public your positive statement that in milk we possess a far cheaper and more powerful blood- and flesh-making food than in beef tea, is met with a skeptical stare. A short time since a consulting physician wrote in one of our periodicals how he was not infrequently called to cases where he found the patient literally starving to death in the midst of plenty. Wines and liquors of all choice brands covered the table, with beef tea, and essence of meats in all their endless varieties, some of which, the consultant was told, were given every half-hour, and that therefore the patient had been well kept up. By a speedy clearance of all but the brandy-bottle, and with the addition of two or three pennyworth of milk, he had on several occasions rescued a young and valuable life from certain death."

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Dr. Lauder Brunton has some very able remarks upon the occasional injurious results of beef tea (*vide Practitioner*, November, 1880): "We find only too frequently that both doctors and patients think that the strength is sure to be kept up if a sufficient quantity of beef tea can only be got down; but this observation, I think, raises the question, whether beef tea may not very frequently be actually injurious, and whether the products of muscular waste, *which constitute the chief portion of beef tea or beef essence*, may not under certain circumstances be actually poisonous. For although there can be no doubt that beef tea is in many cases a most useful stimulant, one which we find very hard indeed to do without, and which could hardly be replaced by any other, yet sometimes the administration of beef tea, like that of alcoholic stimulants, may be overdone, and the patient weakened instead of strengthened."

Prof. Russell H. Chittenden, of Yale University, has corroborated the foregoing, and has affirmed the absence of nutritive properties in beef tea or beef extract.

Now, beef extract is simply beef tea boiled down; and of both preparations it may be truthfully asserted that while they extract from meat its soluble salts, they fail utterly to extract or embody in any form the insoluble yet nutritive fibrin. That beef extracts and beef teas are useful stimulants under certain conditions is quite true; but it is equally true that they leave the nutritive firbrin untouched, because it is insoluble.

What use, does the reader suppose, is made of this valuable fibrin? It is worked up into "dog-cake" and sold for animal food. And we can assert, without fear of contradiction, that the animals receive by all odds more nutriment than the extract-fed invalid!

For the very purpose of dissolving or digesting the insoluble fibrin of meat, pepsin is administered, and no predigested food is worthy of the name unless it contains a useful equivalent of the digested fibrin ready for assimilation.

In this most important respect Mosquera's Beef Jelly and Fluid Beef-Jelly differ from all other nutrients and reveal their superiority over beef extract. Not alone do they contain the soluble, stimulating constituents of meat; but they also contain a large proportion of *pre*-digested fibrin in the form of a palatable peptone. A peptone might indeed be obtained with the aid of pepsin, but it would be bitter and disagreeable. Here comes into play the famous discovery of Señor Marcano, the Venezuelan chemist. Having ascertained by experiment that the common pineapple possesses in its juice a ferment capable of transforming beef fibrin into SWEET PEPTONE, he first digested this fibrin with the pineapple ferment—Bromelin—and combined the resulting palatable peptone with the soluble constituents of the beef. Mosquera's Beef Jelly is accordingly a concentrated nutrient *plus* beef extract—food *plus* stimulant.

The element of palatability is one of the utmost importance, hardly second to nutritive value. Invalids are whimsical and dainty. Their food must possess an inviting taste and odor. It must admit of convenient and varied combinations. Mosquera's Beef Jelly and Fluid Beef-Jelly answer every need of the sick-room. They yield a delicious bouillon, HOT OR COLD. They do not pall on protracted use. They may be served in a great variety of forms, and our pamphlet furnishes a number of practical, tested recipes. Send for it and for specimens of Mosquera's Beef Jelly, solid or fluid.

Prof. Ernst Ludwig* reports as follows on a chemical investigation of Beef Jelly:

Water.....		32.30 per cent.
Ash—soluble in water	11.1	
insoluble.....	3.3	14.40
Albumen, CHIEFLY PEPTONE.		53.30 "

ADULTERATING SAND WITH SUGAR.

Are jewelers in the habit of palming off diamonds for rhinestones?

Or pearls (relatively speaking) for paste?

Or do builders mix sugar with their sand?

Yet we have been charged with adulterating a cheaper substance with one more costly, our preparation of "Malt Extract with Cod-liver Oil" being alleged to show a marked deficiency of the oil. Since malt extract is

*Professor of Applied Medical Chemistry and Director of the Chemical Laboratory in the Pathological Institute of the General Hospital at Vienna.

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considerably more expensive than cod-liver oil, what would be the sense or motive of such a deception—even were we blind to its wrong and danger?

Is not a malicious intent in the house which is taking pains to circulate this slander, palpable to the most *naïve?*

Formerly (prior to 1890) we marketed a preparation of malt extract containing 33⅓ per cent. of cod-liver oil. Complaint reaching us from a number of physicians respecting the keeping qualities of the preparation, we changed the formula and adopted one containing 10 per cent.

To-day we issue two combinations: one contains 40 per cent., and is supplied only on special orders for a more concentrated preparation; the other contains 10 per cent., and is in our opinion the better product. On the labels of both, the exact proportion of cod-liver oil is plainly stated.

Glaring as is the absurdity of the charge, the Trommer Malt Extract Co. are yet continuing to spread this stupid libel. They do not do it openly, but in an underhand way, by circulating marked copies of the *Cincinnati Gazette* for August 23, 1890, wherein was a "cooked-up" interview with some member of the Legislature. An *obsolete* price list *for a previous year* was quoted, and our former claim of 33⅓ per cent. was so perverted as to indicate a dishonest purpose in our 10-per-cent. product.

***

This subject has been recently investigated by the Committee on Adulteration chosen by the New York State Pharmaceutical Association, and consisting of R. G. Eccles, M.D., chairman, W. G. Tucker, Ph.G., M.D., and J. C. Hubbell, Ph.G. The report of this committee is now before us. At the outset it declares:

"One of your committee has practically found that phthisical patients do well on this preparation when the proportion of oil is small, if not too small, while they do not do so well on those goods having the greatest per cent. of oil. This has been put to the test since the present examination began. Full doses, where the quantity of oil is large, were found to annoy the patient through regurgitation, whereas the smaller proportion was at once assimilated."

Proceeding to analyze the three preparations, of Parke, Davis & Co., Trommer, and the Maltine Co., the committee obtained the following results:

NAME.	PER CENT. OF OIL.			
	First Determination.	Second Determination.	Third Determination.	Mean.
1. Trommer's	31.15	30.89	31.12	31.05
2. Parke, Davis & Co.'s	9.68	9.91	9.83	9.81
3. Maltine Co.'s	8.99	8.72	8.85	8.85

"The label on *No. 1* claimed a composition of *40 per cent. of oil and 60 per cent. of extract.* It is therefore *nearly 25 per cent. short of its own claim.*"*

These results need no comment. We leave it now to the candid reader to decide who has attempted a deception, and whose product is properly open to the suspicion that it is not true to the claims made on the label. The Trommer Co. has simply joined the forces and adopted the tactics of an envious competition which leaves no means untried to besmirch and misrepresent our house. As the foremost manufacturers of pharmaceutical preparations, we are the natural target of such aspersions. The above is a fair specimen of their candor.

The report of the Committee on Adulteration has been reprinted by us *verbatim*, and will be sent postpaid on request.

***

A word on the general subject of malt extract. We contend that malt extract should be more than a mere food. It should indeed contain a large percentage of digested starch, but, in addition, it ought to possess digestive activity by virtue of the diastase present. Now this diastase is a delicate ferment: its potency and its quantity in malt extract are both readily lessened by heedless manufacture. To determine the diastatic activity of our product, it is simply necessary to estimate the action of a given quantity of any sample upon starch, under conditions similar to those of natural gastric digestion. It will thus be found that our malt extract is a *more active digestive* than any similar preparation

* Italics *not* ours.—P., D. & Co.

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now on the market; it is likewise a more concentrated nutrient.

In the less important but very desirable qualities of permanency and sweetness, our various combinations are all that can be wished for.

Not one of our malt extracts, plain or combined, is advertised or sold to the public: they are ethical preparations, never found on the shelves of grocery or department stores, and are dispensed only through the pharmacist as prescribed by the physician.

We issue a variety of popular combinations:

Malt Extract with Cascara Sagrada.
Malt Extract with Cod-liver Oil.
Malt Extract with Hypophosphites.
Malt Extract, Ferrated.
Malt Extract with Iron, Quinine, and Strychnine.
Malt Extract with Yerba Santa.
Malt Extract with Pepsin and Pancreatin.
Malt Extract with Beef-Peptone.

THE ASSASSINS OF REPUTATION.

In the midst of a noble discourse on religious toleration, a great New England divine once uttered these memorable words: "The form of persecution has changed, but its spirit lingers. It has given up the halter and the stake, but it breathes venom from its lips, and it secretly blasts what it dare not openly destroy!"

Life often exhibits the spectacle of an evil whose malignant spirit survives the destruction of its ancient forms. Evil is protean—the form changes but the substance remains the same—it is an old foe with a host of new faces. Thus, during the Middle Ages, men hired *bravi* or assassins to kill off their rivals and enemies. A large class of wretches actually lived by renting their daggers. The more dainty conscience of a modern age is shocked by such crude methods of assassination. The *bravo* has been forced out of business; but it would be a mistake to suppose there are no modern *bravi*. Life is safe; but reputation, credit, honor — these receive the stab; the stiletto has simply been superseded by the cowardly innuendo or the treacherous libel.

Who are the modern assassins by whom reputations are murdered? The irresponsible journals and the venal drummers. For the great fraternity of commercial travelers we have a hearty respect—it is made up chiefly of honest and upright men; but among them are to be found a few of mediocre ability and shallow character, ready to do any bidding, and not hesitating to disseminate the vilest falsehoods about the competitors of their employer.

Such is the agency which has been used against our credit in every part of the world. Not alone from all sections of the United States, but from Australia and England as well, come rumors that Parke, Davis & Co. are on the verge of dissolution; that their business has been curtailed; that they have been compelled to reduce their traveling force; that the management has passed into incompetent hands, etc., etc. Coupled with these assertions are falsehoods about the *personnel* of our firm, wild rumors of insolvency, and every species of detraction, no matter how crazy or absurd.

Pending the time when we can lay hands on the real culprits by whom these venomous slanders are set in circulation for the express purpose of injuring our credit, we desire to assure our friends emphatically:

1. That our traveling force is larger today than ever in the past, comprising over one hundred representatives. Our New York, Kansas City and London branches, our Canadian laboratory and our Australasian agency, all report a volume of business exceeding any past record.

2. That, thanks to the steadily growing favor and confidence of the medical profession in our label, our immense facilities at Detroit are now taxed to their very utmost. In some departments we are working with two full forces night and day.

3. That no change has occurred in the management, the principles, or the business methods of our house. We are making the best preparations we know how, and not a product on our long list is protected by patent, copyright, trademark, or secrecy of any kind.

4. That any rumors affecting our standing or credit are outright falsehoods inspired by envious and cowardly competition.

5. That our readers are heartily invited to

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visit us at any time, our *entire* laboratory being open to the inspection of the physician or pharmacist.

"JUGGLING FORMULAS."

The following editorial* we reproduce in full for the reason that it treats of an evil frequently encountered. We have many a time felt impelled to speak our mind about the practice of "juggling" pill formulas, and are pleased that we have been anticipated by this vigorous article. The writer has made no mistake: we can endorse his every assertion:

In our last month's editorial on "Costly Palatability" we expressed ourselves plainly about a class of preparations which stand as evidence of a vicious tendency in medicine and pharmacy. While commending the effort of pharmacists and manufacturers to render medication as agreeable as possible, we entered our protest against that craze which seeks to tickle the palate at any cost—which does not stop short of eliminating an essential ingredient or of tampering with a drug to the detriment of its therapeutic virtues.

Akin to that evil is one which is so often observed in the manufacture of pill formulas. In seeking to satisfy the demand for pills which shall be permanent, beautifully finished, of minimum size, with coatings always unstained, the manufacturer is not seldom tempted into methods which ought not to be countenanced. Thus, one customer may submit a formula for manufacture, calling for some powdered drug, and stipulating a certain diminutive size in the finished pill. The demand may be utterly unreasonable—the formula may be too bulky for the prescribed size; but the customer insists, and the manufacturer with a weak backbone is almost impelled to substitute the equivalent of solid extract and silence the customer's clamor.

Take another example. The oily ingredients in a pill mass are often troublesome and tax the manufacturer's skill, for the pill must contain the amount of oil claimed on the label, and at the same time the coating must remain unbroken and unsoiled. A simple method of avoiding complaint is to omit a portion of the ingredient, and sacrifice curative effect to permanence!

Excessive competition in certain leading pills is apt to cause mischief by tempting the manufacturer to "juggle" his formula. The most striking example in this category is the compound cathartic pill of the U. S. P. Hundreds of pounds are sold as strictly pharmacopœial when in fact the pill owes its activity to an admixture of croton oil or to some other ingredient, active indeed but foreign to the formula. The maker of a strictly U. S. P. pill is here at a peculiar disadvantage, since, the sophisticated formula may actually exert a more vigorous cathartic action.

In the honest manufacture of pills, one fact must never be forgotten: first, last, and all the time, the peremptory duty of the manufacturer is fidelity to formula. A pill should be what its label states, though the heavens fall. Diminutive size and handsome finish are desirable features, to be sure, and should be embodied in the pill whenever it is possible so to do. But beauty and smallness are unimportant compared with honest manufacture, and should never be achieved by tampering with the pill mass.

The second essential is solubility. An insoluble pill is as valuable therapeutically as so much sawdust. And it is utterly indefensible when the solubility of a pill formula is sacrificed—as it not seldom is—for the sake of a combination which may be stored indefinitely without spoiling. A pill can be made permanent readily enough: the trick is simple; but such a pill is more suitable for use as shot, than as medicine.

A coating which does not tarnish or crack is a very good thing in its way. So is a tiny pill which may be readily swallowed. But, we repeat, these are minor considerations: the great essentials are fidelity to formula and ready solubility. These comprise the very foundation of trustworthy manufacture. In many cases they are perfectly compatible with beauty of finish and diminutive size. But where there is an incompatibility and a choice *must* be made, the lesser evil should be elected.

**Bulletin of Pharmacy* for October.

OUR DESCRIPTIVE CATALOGUE.

The demand for our Descriptive Catalogue has been so great that the first two editions were exhausted while the third and revised edition was in press, and for about two months we were unable to fill orders. During this time several thousand orders accumulated. All these have now been supplied, and we have ample stock on hand to meet further demands.

Occasionally we receive a complaint that the book has not reached the purchaser, although we find from our records that it was sent and should have come to hand. A re-

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cent case may be of general interest. One of our friends in Illinois wrote us that the book had not arrived. Ascertaining that it had been mailed almost a month before, we so informed him and suggested that perhaps some one in his office had received the volume and laid it aside without directing his attention to it. In reply we received the following letter:

"I am glad to inform you that your Descriptive Catalogue is received. While on my vacation my son received the book, put it in his book-case, and never gave it a thought again until your letter came notifying me that you had sent it. It might have lain there for a year, had it not been for your letter."

SINGULAR INDIFFERENCE.

No desire to play the Mentor has prompted the occasional paragraphs in THERAPEUTIC NOTES, expressing our wonder at the very common indifference of the practitioner to the quality of medicine furnished on his prescriptions. We realize that the educated physician ought to be alive to the importance of reliable medication, and beyond the need of extra-professional admonitions.

But the fact remains—is as certain as the day—that no class of men, *as a class*, exhibit less concern about the instruments of their art. Plying a delicate, arduous, and responsible craft, the physician's first impulse should be to exclude the possibility of failure from poor drugs. Medicines are his precious tools —they are his pillar in moments of strain and stress—frequently they form his first refuge and his last resort,—yet in many instances how meagre the pains taken to demonstrate their efficacy! A carpenter in choosing his implements would be ashamed of the heedlessness not seldom displayed by the practitioner who fails to specify the brand of drugs which shall enter into his prescriptions.

These reflections are suggested by a passage in a recent communication from a practitioner in Madison, Wis. "Nothing," writes the Doctor, "gives the conscientious physician so much satisfaction, outside his own efforts, as thoroughly reliable medicinal agents; for one, I do not want to be obliged to experiment on the curative action of drugs anew with every prescription I give a patient and you can appreciate the comfort of knowing beyond a reasonable doubt that such a remedy will have such an effect, having before used it in like cases. . . . It is enough to study and worry over the patient without having to assume the duties of pharmacal experimenter each time."

LACTOPHENIN.

The *Therapeutische Monatshefte*, edited by Dr. Oscar Liebreich, contains in the September and October numbers a very elaborate clinical study of Lactophenin by Dr. Hermann Strauss, of the Medical Clinic at Giessen, Germany. Dr. Strauss has subjected this agent to a most searching investigation, and summarizes his conclusions as follows:

1. Lactophenin is a certain, reliable, and (in the overwhelming majority of cases) not unpleasant febrifuge. Compared with the fever remedies hitherto in vogue, Lactophenin possesses an advantage in that no injurious and assuredly no dangerous collateral effects have been shown to follow its use.

2. As an antineuralgic and sedative, judged by experience in the clinic, Lactophenin is at least deserving of a place by the side of similar remedies hitherto used. Its superiority lies in the above-mentioned freedom from noxious collateral effects.

3. With special reference to its application in typhus, it deserves preference to the other medicaments hitherto used, for the reason that it has thus far proved harmless, and, furthermore, seems to exert a certain specific calmative influence on the nervous system.

COUNTERFEIT HYPODERMIC NEEDLES.

A number of unusual complaints have come to us of late, alleging breakage at the shoulder of the hypodermic needle, and failure to fit perfectly. At first we thought the blame was ours, but we now find that cheaper needles of both domestic and foreign make are sold at low prices as "P., D. & Co. needles."

We beg leave to caution the medical profession that every needle of our manufacture bears the initials "P., D. & Co." cut in small letters in the shank. The absence of these letters releases us from any responsibility for defects in manufacture.

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Practical Therapeutics.

COD-LIVER OIL: WHAT IS IT?*

BY REYNOLD W. WILCOX, M.D., LL.D.†

Ever since 1841, when cod-liver oil was so strongly advocated by Bennett, it has held a prominent place in the confidence of physicians. From this date we find that many and careful studies have been made, so that we may say that its scientific use is of comparatively recent origin, although it has been employed empirically for nearly two hundred years. The chemistry of this subject is by no means, even now, complete, although many analyses have been made, so that at intervals one finds in the literature various hypotheses as to what ingredients this remedy's virtues may be attributed. In spite of discordant theories and the contradictory results of chemical analysis, cod-liver oil is still regarded as a remedy of the highest value in diseases marked by malnutrition, of which pulmonary tuberculosis is the most frequent occasion for its employment.

What then can be said of its composition? Briefly, it is principally, first, olein glyceride (70 per cent.) with variable quantities of stearin, palmitin (nearly 25 per cent.), and myristin glycerides, the latter increasing with the darker color. So far no controversy has arisen beyond the unconfirmed statement of Winckler (1852) that glycerin could not be obtained from cod-liver oil, which he regarded as a whole, containing propyl oxide. Second, iodine, in from 0.0012 (Bird) to 0.004 per cent. (de Jongh), its presence first demonstrated by de l'Orme, but even now it is not known in what form it exists. On the other hand, several observers have failed to detect it in all specimens. Third, bromine. Fourth, phosphorus: as pre-existent phosphoric acid, 0.0789; as obtained by total oxidation of the oil, 0.1047 per cent. (de Jongh). Fifth, sulphur. Sixth, biliary acids. Seventh, free acids, calculated as acetic acid, 0.01 to 1.80 per cent. (Charles, 1882), and regarded as butyric and acetic acids by de Jongh (1849). It is quite likely that free oleic, palmitic and stearic acids exist in the oil. Eighth, gaduin, $C_{35}H_{46}O_9$, identical with morrhuic acid (Gautier and Mourgues, 1888), existing as an unstable compound resembling lecithin, and in contact with acids and alkalies decomposing into morrhuic acid, $C_9H_{13}NO_3$, phosphoric acid, and glycerin. Ninth, gadic acid (Luck, 1857), deposited from light-brown oil.

Under the name of morrhuolins are included the so-called alkaloids of cod-liver oil: morrhuic acid mentioned above; dihydrolutidin, $C_7H_{11}N$; asellin, $C_{25}H_{32}N_4$; amylamin, $C_5H_{13}N$; oxycollidin, $C_8H_{11}NO$; morrhuin, $C_9H_{21}N_3$; nicomorrhuin, $C_{20}H_{28}N_4$; the last four being the most active. Gautier and Mourgues found, however, in yellow oils six definite bases: butylamin, amylamin, hexylamin, dihydrolutidin, asellin, morrhuin, and morrhuic acid. It will be observed that they failed to find oxycollidin and nicomorrhuin. So far as the oily constituents, iodine, bromine, sulphur, phosphorus, biliary substances and free acids are concerned, there is virtual agreement in the results of analyses.

*As to the so-called alkaloids, or definite bases, there is abundant opportunity for criticism.** It is remarkable that they are most abundant in the brown oils, and from these is commercially obtained morrhuol, the name applied to an alcoholic extractive derivable from cod-liver oil and of probably indefinite chemical structure. Similarly the term "gaduol" has been employed. Presumably morrhuol, which according to Lafarge (1885) is a very aromatic substance of a sharp, bitter taste found in brown oils 4.50 to 6.00, yellow oils 2.50 to 3.00, and in white oils 1.50 to 2.00 per cent., contains most of the so-called alkaloids, together with the iodine, bromine, and phosphorus, and is the substance which is supposed to represent the active principles of the oil.

The physiological properties of the seven alkaloids have been determined by Gautier and Mourgues to be as follows:

Butylamin: In sufficient doses this produces in animals fatigue, stupor, vomiting, and a certain degree of paresis. In small doses it

*Copyright, 1894. R. W. Wilcox.

†Professor of Clinical Medicine and Therapeutics at the New York Post-Graduate Medical School and Hospital; Visiting Physician to St. Mark's Hospital.

*The italics which appear in the article are ours, not the author's. We have taken this slight liberty with his text for the purpose of emphasizing certain points of paramount importance.—P. D. & Co.

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excites the urinary secretions; in large doses it is at the same time convulsive and paralyzing; in medium doses it throws the animals into a sort of somnolence, with muscular paresis, but with complete conservation of the intelligence. Although poisonous, it does not produce death unless given in very large doses.

Amylamin: This is a very active base. In small doses it excites the reflexes and the urinary secretion. In large doses it provokes convulsive trembling, then regular convulsions and death.

Hexylamin acts almost like amylamin, but with less intensity.

Dihydrolutidin is a rather toxic base, even in small doses, when it produces a notable diminution of sensibility. In larger doses it provokes trembling and convulsions in the muscles of the face. With still larger doses in a guinea pig the trembling increases and becomes more general. Very lively periods of excitation are followed by profound depression with insensibility and paralysis of the muscles, especially of the posterior members. The animal gradually goes into an asphyxiated collapse.

Asellin is only a feebly active base. In sufficient dose it produces dyspnœa, stupor, convulsive troubles, and in large doses death.

Morrhuin is one of the most active principles of the oil; it is also in larger quantity —a little more than one-third of the total alkaloids. This is believed to be a powerful stimulant to the functions of nutrition and assimilation, producing a rapid circulation of the extractive residues of cell life towards the blood and kidneys, where they are eliminated, and in this way provoking indirectly a powerful movement of the assimilation. Virtually it is believed to increase the appetite and to provoke diaphoresis and diuresis.

As we read the results of these experiments, we cannot but be impressed by the fact that these symptoms are the symptoms of ptomaine poisoning. And when one remembers that the process of manufacturing hitherto employed is such that putrefaction is an important factor in the production of the oil, as anyone will testify who has visited the North Cape, where the stench encountered upon the journey is as prevalent and as repulsive as that found near the menhaden-rendering works of the Atlantic Coast, the impression becomes a certainty. *Without doubt, the alkaloids contained in morrhuol are putrefactive or cadaveric alkaloids, and of these amylamin, asellin, dihydrolutidin are assuredly poisonous and are so classified in Gould's table as modified from Vaughan and Novy.* Amylamin can also be obtained from horn and from putrid yeast. Morrhuin, as is stated above, is probably diuretic and diaphoretic. Butylamin may or may not be toxic; it is quite probably the latter. *That any of these alkaloids are present in cod-liver oil when prepared at the place of the fisheries, by a proper process, is extremely doubtful.* So far as I can learn, no analyses have been made of such cod-liver oil. *To assume that morrhuol represents in any way the active therapeutic properties of cod-liver oil, is to assume that cod-liver oil is useful only in the proportion that it is putrefied.* My attention having been called to the reports of Lafarge (1885), and later of Germain Sée, I experimented with morrhuol for several months, and finally, convinced of its absolute failure, I abandoned its use. I was so thoroughly positive of its uselessness that the paper of Bouillot did not induce me to repeat my observations. *If there are any medicinal properties in the preparations of the so-called active principles from which oil is removed, or which are removed from the oil, they must be entirely due to the other substances with which they are incorporated.* The substitution of active principles in place of crude drugs is praiseworthy, when it is proved that these active principles represent the properties of the drug or possess in themselves definite physiological action. No digitalin, nor digitonin, nor digitoxin, has yet been isolated which fully represents digitalis; why then need we expect that alkaloids shall represent cod-liver oil, even if they arise from its putrefaction?

To what then can we attribute the beneficial action of cod-liver oil in wasting diseases? *That cod-liver oil is a food, a food of especial value, because of its peculiar properties.*

To quote Farquharson: "It has been proved by experiment that animal are more digestible than vegetable oils, and cod-liver oil is the most readily assimilated of all. After being emulsified by the pancreatic juice, it comes in contact with the bile, which

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distinctly increases its power in passing through moist animal membrane; and it is probable also that the biliary principles incorporated in its own structure aid in enabling it to be easily absorbed by the lacteals. Its action in the system is to improve the general constitutional tone, to evolve force and heat, and to aid in supplying those fatty elements which are so essentially requisite for the construction and repair of the tissues. It supplies the fatty matter on which the proper functions of cell growth and development depend, the nuclei in the cells being formed of fat."

The free fatty acids contained also aid in emulsification and absorption from the alimentary canal. It improves the nutrition and supplies the fatty ingredients necessary for the growth and repair of the nervous system. It improves the quality of the blood, increasing the number of the red corpuscles, and strengthens the heart muscle. Although the quantity of iodine, bromine and phosphorus is small, so far as their influence goes they are of use. Brunton has pointed out that, because it nourishes the young epithelial cells of the bronchial mucous membrane, enabling them to grow instead of being converted into pus, it is of undoubted efficacy as an expectorant.

Thousands of lives would undoubtedly have been saved, had the profession understood that beef tea, as formerly made, containing scarcely more than the soluble extractives, possesses about as much value as a nutrient as urine. Shall we now go on to administer the extractives of cod-liver oil, *cadaveric alkaloids of demonstrated poisonous properties*—of which the best that can be said is that one is diaphoretic and diuretic in its action and increases the appetite—and discard the really valuable constituents, which make up the food? A tuberculous patient can generate a sufficient amount of ptomaine without any assistance from the physician. It is the prevention of the formation, not elimination, that one seeks in treatment. An analogous procedure would be the administration of beef tea made from putrid meat.

The use of the extractives of cod-liver oil is no new idea. In 1866, an extract, an evaporated watery extract, made from the livers in preparing the oil, was used. It soon fell into disuse. Granting that the ptomaines of putrid oil are harmless—which is as yet by no means proven, for the quantity in which they have been administered has been too small for any definite conclusion—if there are any remedial properties in the extracts or wines it must be in the substances incorporated with them, but which are better administered separately.

How then shall we prescribe cod-liver oil? *By emulsions, which are heavily charged with mucilage and contain water which favors rancidity?* Of all which I have used—and every one which I could obtain has been used in my hospital and dispensary service—but one has been satisfactory, and that only when freshly made. For fourteen years I have used an oil of which the only recommendation it claimed was that it was obtained from fresh livers by cold expression. It was of American origin, and on that account was not obtained from the cod when in as good condition as when off the shores of Norway. As it was, its use was far more satisfactory than that of emulsions or mixtures of whatever sort.

During the past few months I have used with great satisfaction the Improved Lofoten Cod-liver Oil made by Parke, Davis & Company, which is simply an oil obtained on the site of the fisheries from the livers of the fish at the time they are taken from the water. The process of manufacture is carefully carried out so that absolute cleanliness and freshness of the material shall be secured and that no decomposition shall take place. The disagreeable odor and flavor is removed, but no constituent important for its use as a food is taken out. Specimens kept for months have as yet shown no change. The problem seems to be solved. A food to be of its highest usefulness must be palatable; the most weighty objection is now done away with.

The oil should be given during the height of pancreatic digestion, one to two hours after eating, so that it may pass rapidly through the stomach and be absorbed during intestinal digestion. The stools should be watched that more shall not be administered than can be absorbed. If the oil should "repeat," a fact which I have not as yet observed, a few drops of ether added to the dose is likely to obviate that difficulty. The dose is from one to six teaspoonfuls. My conclusions are:

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1. Cod-liver oil is a food, important because of its peculiar properties.

2. *Since it is a food, no extractive can represent its value.*

3. *The purer the oil—the more free from cadaveric alkaloids—the more palatable will it be and the better adapted for its purpose.*

4. The best that can be said of the cadaveric alkaloids is that they may possibly represent its eliminative, they certainly do not represent its reconstructive, properties.

5. It is not proven that the administration of appreciable quantities of the cadaveric alkaloids is devoid of danger.—*Maryland Medical Journal*, October 20, 1894.

As the acknowledged leader in the field of pharmaceutical manufacture, we are the conspicuous target of petty and envious competitors. Pretty nigh every form of detraction has been used against us. We therefore hope that the reader will make it a point to peruse the article on page 57, "The Assassins of Reputation." It will be an interesting object lesson in the calumnies which any house must suffer, once it emerges from obscurity. Such falsehoods seem to be the penalty of success.

THE VARIOUS THERAPEUTIC APPLICATIONS OF KOLA (*Cola acuminata*, R. Br.).

As a Remedy in Cardiac Diseases.—Dr. N. Hudson, in the *Philadelphia Medical Times*, June 26, 1886, gives the details of a case of mitral insufficiency, resulting from a severe endocarditis and complicated with dyspnœa, faintness, debility, periodic and intense headaches of a uræmic character. Three months' use of the kola paste, taking ten grammes once or twice daily in hot milk, rendered the heart's action more regular, vanquished the dyspnœa and faintness, exhilarated the spirits, and increased the weight seven pounds.

Caffeine and convallaria had both been tried without marked result. Digitalis had rendered only temporary and palliative service. Kola, however, effected a gratifying and immediate improvement.

In the *Lyon Médicale* for March 15, 1891, Dr. Chambard Henon reports the case of a woman who had had three children, and at each delivery suffered from alarming syncope and cardiac palpitation, the action of the heart being so feeble in one case as to occasion the death of the fœtus. On a subsequent delivery Dr. Henon administered a number of chocolate tablets of kola nut, and claims that symptoms of syncope were entirely prevented.

As a Remedy in Diarrhœa.—Dr. Leon Ernest Monnet, of Paris, France (*Therapeutic Gazette*, 1885, p. 223), says of kola:

"There is one property belonging to it which deserves to be especially insisted upon, viz.: its efficacy in the treatment of diarrhœas. Drs. Duriau and Cunéo have both reported cures in rebellious diarrhœas under its use. Dr. Dujardin-Beaumetz has also noted its value in intestinal fluxes. Dr. Cunéo's observations were principally relative to the intestinal fluxes of tuberculous subjects. In my own observations at the military hospital at Lille, I found it beneficial in one inveterate case, where the ordinary astringents had failed. Dr. Duriau employed it with success in one case of sporadic cholera, and Dr. Huchard has used the various elixirs and the wine of kola in undoubted cases of cholera with some benefit, though he does not assign to the new medicament the rank of a curative agent."

Very many experiments have been made with kola in the treatment of the atonic diarrhœa to which Europeans are frequently so liable in tropical countries.

In a monograph by Dr. Cunéo *sur les Propriétés Thérapeutiques de la Noix de Kola*, a number of cases given in detail bear witness to its remarkable efficacy in chronic diarrhœas of unusual severity.

In the treatment of the chronic diarrhœa of infants Dr. Combemale has found the following (*La Semaine Médicale*) to be of great value:

℞ Ext. kola, 15 grains.
Syrup quince, 2 ounces.

M. Sig.: One teaspoonful every hour till the whole is taken.

As a Remedy in Neurasthenia.—Dr. Gihon (*Philadelphia Medical Times*, April 17, 1886) reports the treatment of a case which is described as presenting the group of symptoms designated collectively as neurasthenia.

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The patient was a lady whose nervous equilibrium had been very seriously deranged, and who suffered with excruciating headaches, attended with nausea, loss of appetite, great despondency, insomnia, palpitation of the heart, intercostal neuralgia, and perturbed secretions. Under the use of kola these symptoms, which had resisted the previous exhibition of quinine, arsenic, iron, bitter tonics, guarana, and diffusible stimulants, quickly disappeared. The headache, which had been recurrent after temporary relief, did not return; the appetite was recovered, muscular vigor regained, and the mental dejection markedly relieved. The patient enjoyed refreshing sleep, and the secretions became normal. The remedy produced neither gastric disturbance nor constipation. The method of administration was similar to that of chocolate. It was taken hot, triturated with sugar and boiling water, in doses of ten to fifteen grammes twice a day, between meals; a small quantity of some flavoring extract like vanilla was used to cover the somewhat disagreeable odor and taste.

Properly in this connection comes the consideration of kola when taken as a stimulant in the absence of food, or, as it is popularly expressed, as a substitute for food.

Mr. C. F. Elliott, reporting officially on the botany of Sierra Leone (*Medical Times and Hospital Gazette*), declares "one kola nut, or even half a nut, will enable a man to dispense with food and to support great fatigue for twenty-four hours or more. It is an excellent nerve tonic, and is especially desirable for keeping the brain clear and active at night; it should not be taken less than four hours before retiring, as it prevents sleep."

M. Burdo, the African traveler, says that the Soudanese Mussulmans partake of kola for the purpose of enabling them to continue their long fasts.

We learn also, while writing on this subject, that the French Alpine Club has adopted kola as a stimulant or nutrient in their mountain-climbing expeditions, and their general testimony is that it has rendered them the greatest service, especially in preventing loss of breath and in sustaining muscular strength.

As a Remedy in Melancholia.—The usefulness of kola in this respect has been already referred to in the foregoing, but Dr. J. H. De Wolf, in *Medical Age* (1890, page 157), calls attention to a special indication he found for the drug in the profound depression and melancholia that so frequently accompany phthisis. He informs us that he used the fluid extract kola in ten-minim doses, administered in a glassful of wine of coca (Lorini); "the kola enhances the therapeutic activity of the coca."

Therapeutic Summary.—Several very eminent clinicians have epitomized their experience with kola, and, as it were, have summed up in a few words all the salient points observed with regard to the drug. Dr. Dujardin-Beaumetz (at a séance of the Paris Académie de Médecine, May, 1890) states that the numerous experiments made in his laboratory, at the Hôpital Cochin and in the clinical services of the Lille hospitals (where Dr. Monnet was formerly chief of the clinic) have all demonstrated the elective action of kola on the general nutrition, and upon the circulation in particular. These experiments have proved that the preparations of kola were possessed of a real potency in cardiac affections, and that the sphygmographic tracings in the monograph of Dr. Monnet very satisfactorily exhibited the tonic effects of this substance.

Dr. Bernard Schuchardt, of Gotha, is the author of a most exhaustive work entitled "Die Kola-Nuss in ihrer commerciellen, Kulturgeschichtlichen und medicinischen Bedeutung" (Rostock i. M., 1891); he thus concludes with regard to its medicinal properties:

"Kola should accordingly be employed as a diuretic in heart disease, and especially in conditions of feeble heart; in neuralgias; in severe fevers of adynamic character and during the period of convalescence after the latter; in exhausting diseases; in dyspepsias; chronic and obstinate diarrhœas; in cholera; and, finally, as an excitant and exhilarant in cases of mental depression."

* * *

RELIABLE PREPARATIONS.

Fluid Extract of Kola Nuts (P., D. & Co.); dose, ten to thirty minims.

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Kola Cordial (P., D. & Co.), a palatable preparation of the drug, 120 grains of which are represented by each fluidounce of the Cordial. Dose, one to two teaspoonfuls.

Elixir Kola Compound (P., D. & Co.): One fluidounce represents forty grains each of coca, kola, and celery seed, combined with aromatics. Dose, one to two teaspoonfuls.

CONSTIPATION AND DEFECATION.

BY JOHN ASHBURTON CUTTER, M.D., NEW YORK.

Constipation is largely due to lack of nerve force; this lack may be caused by many things, and it is the physician's business to find out what the leaks in the patient's economy may be. One man eats impoverished food; another works too hard; another is always troubled by his affairs; another may have some chronic disease sapping his vitality; in women pelvic disease takes away nerve force and causes constipation. Habits of life are also to be blamed if they cause constipation; nature's calls cannot be neglected with impunity, for if so, nature soon forgets how to do her regular work. Want of exercise causes constipation, yet those leading sedentary lives who pursue a healthy course of feeding are not constipated. Indeed in studying constipation one has to make a most thorough examination of his patient, often by physical exploration, the use of instruments of precision like the microscope, and the use of chemistry in the study of fluids; find out what the trouble is in the body, remedy that, and the constipation will cease in time.

With respect to diet, give wheat preparations made of the whole wheat, California prunes without sugar, lean meat, and few other articles of food, as too great a variety of food is not wholesome in these neurasthenic cases.

I believe the inordinate use of fruits bad, because they tend to acid fermentations and have not the chemical elements in abundance to amply nourish the body.

Medicines as Adjuvants.—The standard pill of aloin, belladonna, nux vomica and podophyllin is a good assistant; fluid extracts of boneset, dandelion and cascara sagrada are fine tonics for the bowels and stimulants of the secretions. Exsiccated or chemically pure sulphate of soda in water is the best form I know of to administer salts.

Glycerin by the bowel, either free or by Parke, Davis & Co.'s suppositories, is a good adjuvant.

Constant flushing of the colon is a dangerous thing; the putting of two to four quarts of water into the colon will not only clean out the big bowel, but it will syphon or suck out of the small bowel the nutritive forms of food that are about to be absorbed, and greatly prostrate a patient.

Many cases of constipation do not drink enough water, whether hot or cold; there is not enough fluid in the body for the normal secretions and eliminative fluids in such; this condition should be remedied.

The injection of oil into bowels to soften hard fæcal masses is not a new idea, but one that is used altogether too little; to have a patient suffer for hours after passing a hard fæcal mass is useless; *painless defecation* should be obtained by this use of sweet oil; it sometimes will stay in the bowels over night, gradually softening the hardened fæcal concretions; movements will come in the morning with or without further assistance from drugs or chemicals, according to the case.

In closing: Let the physician find out in cases of constipation the leaks of nerve force; stop those leaks; feed plainly; use drugs as indicated; *and procure painless defecation.*—Condensed from *Journal of the American Medical Association*, July 28, 1894.

CASCARA FOR THE ELIMINATION OF URIC ACID.

BY DR. W. H. WALLING.

It seems to be the accepted opinion that the pathology of uric acid is more a matter of defective elimination than of excessive formation. Osler says that "certain symptoms arise in connection with defective food or tissue metabolism, more particularly of the nitrogenous elements. This faulty metabolism, if long continued, may lead to gout, with uratic deposits in the joints, acute inflammations, and arterial and renal disease."

Not getting the desired results from simply stopping the apparent excess by the use of substances claiming to effectually remove

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uric-acid excess, I questioned the commonly accepted theories, and was finally led to adopt an entirely different line of treatment. This was done by dropping all the so-called antilithics, and relying simply and solely upon a single remedy — Cascara sagrada. Repeated trials convinced me that the faulty metabolism is more quickly remedied with this drug alone than with any other or any combination.

Mrs. G——, aged 55, had for years been subject to uric-acid storms, the usual remedies being of no avail. Having exhausted these, I began the exhibition of the aromatic fluid extract of cascara sagrada, made by Parke, Davis & Co., in ten- to fifteen-drop doses, two or three times a day as demanded, finally settling on one single dose at the close of the day. Active catharsis was not aimed at, but a gentle laxative effect was constantly maintained for a prolonged period. The effect was not at once apparent, but within two weeks there was marked amelioration of the aggravated symptoms, and in four weeks' time the swollen joints had almost resumed a normal appearance, the soreness having nearly disappeared. At this writing (two months having elapsed), there is no complaint whatever, but the remedy is continued. No change was made in the diet, as I desired to more fully test the remedy, and am fully satisfied that the good results were due solely to the cascara. I may add that I have tried other brands of cascara, but they have not been satisfactory, hence I have come to regard the fluid extract above alluded to as the only one upon which I could confidently rely; it never fails, hence my preference for it.

This drug is an invaluable intestinal tonic in chronic constipation, and other disorders of digestion, but the dose must be regulated to suit the case—ten to twenty-five drops, once, twice, or three times a day, given in water or milk, either hot or cold, as may seem best; I prefer the hot diluent. I also find it is better to give it about an hour before meals, or at bedtime. The fluid extract as now prepared is very palatable, being entirely devoid of the old-time bitterness so characteristic of many preparations of cascara. I have also found it difficult, at times, to get the article prescribed, hence frequently purchase it at the wholesale house and dispense it myself. In this way there can be no substitution.— *Medical and Surgical Reporter.*

STRONTIUM BROMIDE IN FUNCTIONAL DISORDERS OF THE STOMACH.

BY JOSEPH M. PATTON, M.D.*

Since M. Paraf Javal removed the ban of impurity from the salts of strontium, the therapeutical exhibition of this drug has demonstrated not only its utility in various diseases, but also the absence of those toxic effects, due principally to barium, which formerly brought the strontium salts into such therapeutical disrepute.

To the above effect we have the testimony of Constantin Paul, Dujardin-Beaumetz, Sée, Fere, Laborde, Hassan, and others. Sée has used the bromide of strontium in a number of cases of functional disorders of the stomach with great benefit. My experience with the lactate of strontium agrees with three of the conclusions of Paul—*i.e.:* that it is not toxic; that it is diuretic; and that albuminuria in parenchymatous nephritis diminishes under its use. In regard to the method of its action in diminishing the albuminuria, the view of Beaumetz that this occurs through the action of the lactate of strontium on the stomach seems more in conformity with the general action of the strontium salts.

The favorable effect of the bromide of strontium in a few instances of functional gastric disturbance of recent origin, led me to the systematic employment of the drug in more chronic cases of derangement of the stomach, with or without dilation.

[Professor Patton here describes in detail three cases characterized by pain in stomach and cardiac region, distention, palpitation, eructations of gas, dizziness; in each case, examination of heart, lung, liver and spleen proved negative.]

These cases are fair instances of a number of others which might be cited, but which would be in the main but repetition. It is admitted that regulation of the diet and other hygienic measures adopted in such cases have much to do with recovery. In Case 2, how-

* Professor of Internal Medicine, Chicago Policlinic.

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ever, all such means had apparently been thoroughly lived up to without much result.

The strontium appears to be beneficial mainly in two ways:

First, it controls the nervous irregularities of the circulation, and relieves the dizziness, faintness, insomnia, and dyspnœa.

Secondly, it increases the tone of the muscular action of the stomach along with the improvement in digestion, the latter being probably largely dependent on the former. The rapid reduction in the size of the stomach is sometimes surprising. The regulation of the diet mainly consisted in prohibition of the carbohydrates and alcohol, allowing only a little dry wine, milk, seltzer, plain soda-water, or boiled water as beverages.

In some instances where there is marked arythmia of the heart with consequent circulatory disturbances, it is well to begin treatment with from eight to ten drops of tincture of strophanthus (P., D. & Co.) in conjunction with sodium or strontium bromide to control the cardiac irregularity.—Condensed from *Chicago Clinical Review* for August, 1894.

HOW TO GIVE PILLS TO CHILDREN.

Bond, in the *Virginia Medical Monthly* for July, 1894, states that the inability of smaller children to swallow pills without chewing them up renders the administration of certain ill-tasting drugs to such patients very difficult, and really in many cases becomes a very serious hindrance to necessary treatment.

This fact is especially striking when we consider the treatment of malarial fevers in small children by means of quinine. The hypodermatic method and administration by the rectum are too unhandy for general use. Application through the unbroken skin is too uncertain and inconvenient. The drug must be given by the mouth in nearly all cases, or not used at all. Solutions of quinine in acidulated water are, indeed, most efficacious in the cure of the disease, but the philosophy of the Stoics has not yet become a fad among the grown folks of America, and we need not expect children to practice its teachings. Quinine may be dissolved in tincture of iron, and, when syrup is added, the combination of nasty things will sometimes be taken without much objection by older children; but iron is often unnecessary or contra-indicated in these cases.

The administration of quinine in bulky mixtures of substances which cover the taste of the drug is open to grave objections, for it may well be questioned whether the large quantities of liquorice, yerba santa, chocolate, etc., are not positively injurious in many cases to the already enfeebled stomachs of young patients, or even of older ones, ill with severe malarial diseases.

Tablets of chocolate containing definite quantities of tannate of quinine have found some favor with physicians and are greatly enjoyed by certain children. They, however, are open to the objection that tannate of quinine is not a sufficiently active preparation of the drug to warrant reliance upon it in severe cases.

With some confidence of receiving an attentive hearing the author recommends a method he has found efficacious in his own practice. The quinine sulphate is ordered in pill form with dilute acid, generally aromatic sulphuric acid, and the mother of the patient is directed to break up each pill and mix it with a little brown sugar. This is put upon the tongue dry, and a mouthful of water carries it into the stomach. Sometimes sweet chocolate is broken up and used instead of brown sugar, or it is taken into the mouth before and after the bits of quinine-pill and sugar. A stick of liquorice root may be used in the same way. In this way a very little of the masking substance suffices at each dose. The pill of quinine sulphate made with aromatic sulphuric acid is not only very soluble, but also in its smallest possible bulk.

It will readily be seen that by means of the pill broken with brown sugar or other masking agent, any drug or mixture of drugs which can be made into pilular form may be administered to children with facility. Since it occurred to the author to try this method he has never felt the need of mask mixtures for such prescriptions. Moreover, the mothers of the children take kindly to the plan.—*Therapeutic Gazette.*

EXOPHTHALMIC GOITRE.

James K. Crook, M.A., M.D., Professor of Clinical Medicine at the New York Post-

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Graduate School, and also of Bellevue Hospital, recommends for the persistently painful heart's action in this disease the following:

℞ Tincture aconite root, } ää 1 minim.
Nitroglycerin (1-per-cent.), }
Fl. ext. Cactus grandiflorus (P., D. & Co.), 10 minims.
Distilled water, q. s. to make 1 drachm.

This dose to be taken three times daily—on rising, at noon, and at bedtime.

For the anæmia he advises a five-grain Blaud's pill combined with a grain of quinine, after each meal. One drachm of *pure* cod-liver oil may be taken at the same time, if well borne. A soft, nicely fitting bandage, applied over the eyes at bedtime, will promote the patient's comfort during the night and relieve the tension of the eyelids. It is said that the same bandage, applied snugly to the neck, will facilitate the diminution of the thyroid enlargement, but Dr. Crook has had no personal experience in this direction.

CASCARA SAGRADA IN RHEUMATISM.*

BY H. T. GOODWIN, P. A. SURGEON M. H. S., LOUISVILLE, KY.

In your June number of the *Medical Monthly* I noticed an article by Dr. H. Ray Cannon, advocating the use of cascara sagrada in rheumatism, and claiming it as an original discovery.

If the gentleman will refer to the *New York Medical Journal* of June 9, 1888, he will find an article by me on the same subject. Since writing that article I have used cascara sagrada both in hospital and private practice, and though I no longer regard it, as I did then, almost as a specific for rheumatism, I still look upon it as a most valuable agent in the treatment of that disease.

In many cases I have obtained the most gratifying results within forty-eight hours after its administration when salicylate of soda, potash, colchicum, gaultheria and other well known remedies had failed most signally. In other cases, in which both it and salicylate of soda, when given alone, had failed in ameliorating the symptoms, the two combined have effected rapid recovery.

When using the two together I usually write the prescription as follows:

℞ Sod. salicylatis, ʒ ij.
Ext. cascaræ sagradæ, fl., } ää ʒ iij.
Ext. glycyrrhizæ, fl., }
Aq., q. s. ad ℥ iv.
M. Sig.: ℥ ss q. i. d.

If the cascara is to be used alone I give it thus:

℞ Ext. cascaræ sagradæ, fl., } ää ℥ iss.
Syr. aurantii cort., }
M. Sig.: ʒ j in a little water q. i. d.

Increasing or decreasing the dose as necessary.

I recollect particularly one case where the patient was brought to the hospital on a stretcher. His joints were swollen, and the pain so intense that the slightest movement or jar caused him to groan aloud. He was at once put upon the cascara treatment, and within three days he was walking about the wards. Another patient, who had been subject to rheumatism periodically for many years, obtained equally gratifying results from cascara, and told me afterwards that he always carried a bottle of it with him, as he would not be without it for any consideration. He had had two or three light attacks after leaving the hospital, but always succeeded in arresting them with the cascara.

The cases in which cascara acts best are the acute, with swollen joints and constipated bowels.

In anæmic patients I give iron at the same time, but in separate mixtures.

As there is a great difference in the cascara manufactured, much care should be exercised in selecting a good article.*

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We have a reprint of the article contributed by Dr. Goodwin to the *New York Medical Journal* in 1888, and have also republished a subsequent communication of Dr. Goodwin's on the same subject to the *Therapeutic Gazette*. Various medical men have since affirmed the virtues of cascara sagrada in rheumatism. On application we shall be pleased to send any or all of the following reports:

* Communication to the *Louisville Medical Monthly* July, 1894.

* Dr. Goodwin's experiments were made with our preparation. A good drug may be disgraced by a poor preparation. Our fluid extract of cascara sagrada is reliable. We introduced the drug and can vouch for the efficacy of our product.

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American Practitioner and News, November 24, 1888. Editorial.

Medical Summary, November, 1888. Report by James M. Hole, M.D.

Medical Science, February, 1889. Report by J. S. Morris, M.D.

Alabama Medical and Surgical Age, February, 1889. Editorial.

Medical Age, 1889, page 345. Report by W. M. Dunn, M.D.

JAMAICA DOGWOOD IN VOMITING.

BY L. M. SWEETNAM, M.D.

For some years I have been using Jamaica dogwood (*Piscidia Erythrina*) in the vomiting of pregnancy, with the greatest satisfaction. In more extreme cases, in which the vomiting or retching is almost constant independent of the taking of food, the remedy is best given as an enema in three or four ounces of boiled starch. With a view to increasing the action of the Piscidia, I combine with it the bromide of sodium—giving half a drachm of the fluid extract (P., D. & Co.) to twenty grains of bromide, every three or four hours. Where the stomach will retain the remedies, a somewhat smaller dose will answer by mouth, but usually administration by rectum is more satisfactory. After the second or third day an injection in the morning, and another in the evening, not only secures relief but brings about a return of the appetite, so that the patient is enabled to take and retain the more digestible solid foods.

Some little time ago, while preparing to operate for vesico-vaginal fistula, I recalled my experience with dogwood in the vomiting of pregnancy, and determined to give it a trial. After the operation—commenced under chloroform, and continued under ether—vomiting started, when the nurse administered the dogwood mixture, and after the first hour there was no nausea.

I have since used Jamaica dogwood in a number of cases, without disappointment. Several times, the mixture being withheld too long, nausea has developed, but only to give way upon the administration of another enema. The effect has been so promptly satisfactory that I am led to hope that a serious drawback to the administration of anæsthetics (ether and chloroform) may be eliminated.—*Canadian Practitioner.*

DIRECTIONS FOR USING NUCLEIN SOLUTION, 1-PER-CENT., FROM YEAST (PREPARED ACCORDING TO THE FORMULA OF VICTOR C. VAUGHAN, M.D., PH. D., PROFESSOR OF HYGIENE IN THE UNIVERSITY OF MICHIGAN).

In the treatment of tuberculosis, Nuclein should be given hypodermatically in gradually increasing doses.

Commencing with ten minims, increase the dose five minims a day until it reaches sixty to eighty minims.

The best results are obtained with daily injections. In most patients a rise of temperature of one-tenth to three or four degrees will follow in from one to three hours after the injections.

A numbness of the adjacent skin, which may run down the nearest arm or leg, often follows the injection. This is of no significance, and passes away in a few hours.

The pain of the injections becomes less the oftener they are repeated.

It will generally be found most convenient to give the injections in the muscles of the back or in the upper part of the chest.

If the patient is quite thin, the injections are less painful when made in the gluteal region.

The pain is less if the needle is thrust deep into the muscles rather than subcutaneously. The larger nerves and blood-vessels are, of course, to be avoided.

In giving large quantities of fluid hypodermatically, there is always danger of induration and abscess. To avoid them observe the following precautions:

The syringe must be occasionally washed with 5-per-cent. carbolic acid followed by boiling water. The needle should be kept in a small dish of 5-per-cent. carbolic acid.

The spot where the injection is to be made should be thoroughly washed with the 5-per-cent. carbolic. This disinfects the skin and also acts as a local anæsthetic, diminishing the pain of the injection.

To get the Nuclein into the syringe, it will be found convenient to have a small dish or beaker; a large salt-cellar will do. This should be sterilized in the same manner as the syringe. Pour into this small dish the amount of Nuclein to be used, and then draw into the syringe.

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Keep the syringe, needle, small dish, and bottle of Nuclein in some dust-free receptacle.

A syringe holding 80 minims is much more convenient than a smaller one that has to be refilled several times.

If for any reason the injections cannot be given, the solution may be given by mouth. The dose should be one tablespoonful in half a glass of water, taken a half-hour before meals and at bedtime.

In mouth and throat affections the solution can be used in any spray apparatus, or diluted with two or three volumes of water and used as a gargle.

Diluted with several volumes of water it has been used with good effect as an injection in catarrhal and ulcerative condition of the bowel.

"VIBURNUM PRUNIFOLIUM."*

BY H. R. HOLMES, M.D., PORTLAND, OREGON.

Cerna considers *Viburnum prunifolium* briefly among the new remedies, and it may appropriately appear here, for Bartholow in his "Materia Medica and Therapeutics," published in 1886, neglects its mention, and H. C. Wood in his exhaustive treatise on "Materia Medica and Therapeutics," published as late as 1889, leaves it out entirely.

Although Dr. Edward Jenks in 1876 published his observations on "The Influence of Viburnum Prunifolium in Diseases of Women," and although before he had written of it, it had really only a reputation for preventing abortion, he invited the attention of the profession to its great value in all uterine disorders characterized by the loss of blood.

Viburnum prunifolium, or black haw, is a beautiful shrub growing about as large as the common osage orange, and is said to flourish in the Southern States, east of the Mississippi. Like the cinchona tree, the bark is the part which yields the medicinal virtues. It has a specific action on the female reproductive organs and is anti-menorrhagic and anti-metrorrhagic. Infusions and decoctions may be used, but in these days of refined chemistry there is a fluid extract which requires no further recommendation than its simple mention. Parke, Davis & Co.'s fluid extract is the preparation which I have mainly relied upon, but their compressed pills and tablets of the solid extract have also attracted my notice, and I shall proceed to prescribe them, providing they prove particularly pleasant to the palates of patients.

The liquor sedans, containing black haw, golden seal and Jamaica dogwood combined with aromatics, is an excellent preparation, to which in certain cases ergot may be profitably added.

My practice, all things being equal, is to prescribe black haw to prevent abortion; to control menorrhagia and metrorrhagia from uterine fibroid or endometrial fungosities; as a sedative in ovarian congestion and its ordinary consequences, etc., and, too, in almost all kinds of pelvic irritation, congestion, and inflammation. May I just here inject the remark that had Hodge, a quarter of a century ago, known the value of our remedy, he would have been gratified by its influence in the treatment of what he termed "irritable uterus"? I will proceed at once with the narration of a few illustrative cases:

Case 1.—Mrs. M——, age 30; married eight years; called me in January, 1892; had within last six years aborted four times at fourth month; general appearance healthy; about four months advanced in pregnancy; within last two hours had a smart uterine hæmorrhage, as was usual about this period in her gestations. Ordered patient to bed, and prescribed a drachm of fluid extract viburnum every hour until three doses were given. Within three hours all hæmorrhage had ceased; a week later the patient was walking about, taking a dose of her medicine three times a day, which she continued about a week longer. Two months later patient had another similar attack, with similar result on same treatment. The forward march of her gestation was without remarkable event, and in June following she was delivered of a healthy male child.

Case 2.—Mrs. S——, age 29; married one year; called March, 1893; had metrorrhagia for three years to the extent of keeping her in bed half the time. Thorough examination resulted in diagnosis of submucous fibroid of uterus, size of hen egg. Fluid extract of

*Read in the Section on Materia Medica and Pharmacy, at the forty-fifth annual meeting of the American Medical Association, held at San Francisco, June 5–8, 1894. Published in the *Journal of the American Medical Association*, October 27, 1894.

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ergot was given, 3 j *ter in die* for two months, while patient was kept in bed, with very little perceptible effect on quantity of flow. A drachm of fluid extract of ergot with the same amount of liquor sedans being prescribed daily, the patient, who had been bedridden for half the time for nearly three years, within a fortnight was able to be up and about, and is now enjoying what she calls good health. At menstrual times the flow lasts four days and is about right in quantity.

Case 3.—Mrs. B——, age 22; consulted me in August, 1892; began menstruating while racing for a prize at college six years ago and eight months following a severe spell of scarlet fever. Soon after, though her memory is not precise on this point, she found herself irregular in her turns, and has been so ever since, but for the last three years has flowed very freely about every three, four, or five weeks—the period lasting usually as long as eight or ten days. Examination shows a retro-displaced uterus, a granular erosion about the os uteri, a conoidal cervix, and pruritis ani. Patient was advised to take ether and allow the conoidal cervix to be treated surgically, as well as the endometrium to be curetted, for chronic endometritis had been diagnosticated; and dilatation of the sphincter ani was also proposed. However, as the extremely nervous state of the woman made her regard any mention of operative procedures with intense dread, she was put on the following prescription:

℞ Ext. ergot, fl., 6 drachms.
Ext. vibur. prun., fl., 2 ounces.
Tr. nucis vom., 2 drachms.
M. Dose: A teaspoonful three times daily.

Within three months a steady improvement had announced her relief from anæmia; menstrual flow was not excessive or painful; the rectal congestion and pruritis ani had subsided. Early in 1893 Mrs. B—— became pregnant, and in November was delivered of a healthy male child. The sphincter ani, and recto-vaginal septum for an inch and a half above it, were torn. These have, by surgical interference, been repaired, and the patient appears to be in good health.

Other cases could be cited, but the variety brought forth, it is hoped, will serve sufficiently to illustrate the therapy of this valuable remedy.

LIQUOR SEDANS AS A UTERO-OVARIAN SEDATIVE.

BY CHARLES KELLEY GARDNER, M.D.

This I find to be a utero-ovarian sedative and anodyne of exceptional value, as in my hands it has produced the most brilliant and flattering results, far exceeding my most sanguine expectations.

Mrs. W——, æt. 44 years, and approaching the menopause; very anæmic, thin, and of a nervous temperament; much anorexia at times; habitually constipated; complains often of headache and palpitation, with frequent but scanty micturition; menstruation very irregular, returning every three to five weeks, and lasting from two to four days; flow small in amount and nearly colorless, attended with violent pains in the lumbar region and groins, with general tenderness over the hypogastric region; no organic lesion of the heart—simply functional as a result of other lesions.

Upon examination, I detected retroversion of the uterus of the second degree, and a profuse leucorrhœa. Had previously almost exhausted the materia medica in seeking a remedy for her relief; had given Hayden's viburnum comp., aletris cordial, fluid extract *Viburnum prunifolium*, cannabis indica, etc. As a *dernier ressort*, I ordered Liquor Sedans, one drachm four times a day, to be continued during menstrual period; Fowler's solution with bromides; and an injection for the leucorrhœa; also placed a Thomas retroversion pessary. Saw her four days later; she met me with a smile and remarked the "new medicine" was going to "cure" her. Her improvement has been steady and rapid; appetite good; menstrual epoch unattended with pain; discharge higher-colored and more profuse, lasting from five to six days, and more regular than before for years. Leucorrhœal discharge disappeared; does not suffer with palpitation or headaches. Such is my happy success with that grand therapeutic agent, Liquor Sedans.*

A CASE OF ACNE VULGARIS.†

BY J. L. JELKS, M.D., MEMPHIS, TENN.

Mr. G——, aged 22, applied to me for treatment of an acne vulgaris. Patient ap-

*Liquor Sedans was introduced by us. Any druggist will furnish the genuine product on a prescription specifying P., D. & Co.

†From a paper read before the Memphis Medical Society.

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parently in best of health; appetite and digestion good. His condition dates back two years, before which time his skin was fair and clear of disease. His affection grew steadily worse until he applied to me, three months ago. I at first administered phosphate of soda internally, in teaspoonful doses, twice daily; had him bathe his face twice per day with Parke, Davis & Co.'s Ethereal Antiseptic Soap, after which he was directed to rinse his face with bichloride-of-mercury solution. He seemed to improve very slowly, and I began the administration of elixir iodobromide of calcium compound, with liq. potassi arsenitis, internally; and, as he had some comedones on his face also, he was directed to express them every night when any remained or others made their appearance after the first operation, which was done by myself by means of a silver tube pressed over each after curetting, and then washing the face thoroughly with tr. sapo viridis, after which bichloride solution was used for rinsing. Patient progressed nicely, and continues to improve. The case, as above noted, appeared about the age of puberty—which is the rule in this affection, I think.

I am timid in expressing the belief that sexual peculiarities or abuses have much to do with the causation of such affections—acne in particular. We note the fact that they most frequently make their appearance about the age of puberty—I believe, too, more frequently in nervous or irritable subjects or dyspeptics. In some of them, I will venture to say, we will find, if the closest observation be taken, subjects either of over-eating and dissipation in drink or sexual abuses. Masturbation, I believe, is one of the many causes, as well as uncleanliness of the generative organs. Then, it seems to me that some families possess a predisposition to affections of this kind, though free from any taint so far as we can learn.

GERMAIN SÉE ON FERRATIN.

The distinguished French savant, Prof. Germain Sée, reported his views on the therapeutic value and place of Ferratin to the Academy of Medicine of Paris, August 21, 1894.

Prof. Germain Sée said that he had found occasion during his attendance at the Hôtel Dieu to employ Ferratin and to study its effects on various clinical cases. Ferratin seemed to have a direct significance in the nutrition of the tissues, and even after prolonged use it produced no derangement of the stomach or intestines. It had a pronounced curative effect. It acted mildly astringent, without causing hurtful excitement or constipation—disturbances commonly following the use of ordinary ferruginous preparations; but as a remarkable fact, it caused a strong increase of appetite—always precarious and capricious in anæmic patients—and also regulated the movements to a normal condition. Its administration was free from any unpleasant side- or after-effects. Ferratin, 0.5 to 1.5 grammes per day in divided doses, was primarily a valuable food product; it excited appetite and thereby offered a powerful adjuvant in permitting the absorption of food, and it contained a fixed proportion of iron which was highly assimilable and thus replaced a vital insufficiency.

The administration of Ferratin, said Prof. Germain Sée, was indicated in anæmia from hard work, though the patient have the appearance of good health; in chlorosis; in those weakened by too rapid growth and puberty; in those fatigued by study; and, in short, in all in whom a diminution of red blood-corpuscles had ensued, due to no matter what causes.

Prof. Germain Sée concluded his report by promising that he would keep the Academy informed as to his further studies of Ferratin, which he was conducting simultaneously at the Hôtel Dieu, in his medical clinic, and in his physiological laboratory.—*American Therapist.*

A CASE OF MYXŒDEMA.

BY ROBERT E. BELL, M.D., LOWELL, MASS.

There has been so much written on this subject, and it is so prominently before the profession, that I wish to report my one case, as it has presented some features that I have not seen mentioned.

Mrs. B——, 54 years of age, consulted me first January 7, 1894. Family history good. Father and mother both lived to be almost seventy; two brothers and four sisters living. She dates her symptoms from about eighteen

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months ago. She comes to me because she cannot see to read, and thinks her glasses need changing. V=$\frac{3}{10}$; glasses do not improve her vision. Ophthalmoscopic examination simply shows the fundus somewhat paler than normal.

Patient says that about eighteen months ago her face and hands began to bloat, and she had difficulty in keeping hold of objects in her hands, was constantly dropping dishes, etc. Then her limbs began to swell; and finally she noticed she could not get her clothes on alone, her arms were so useless. She had become very sensitive to cold. Her hands and arms pained her so she could sleep but a few hours. Was dizzy, and felt like falling if she attempted to walk. No appetite. Urine at times was very heavy and almost black. She could not go up stairs without getting out of breath. When she came to me, there was pallor of the face and a puffiness about the eyes. There was œdema about the ankles and legs. The skin of the hands was dry and rough. The hair had no lustre. She talked very slowly and deliberately, and walked as though completely tired. Examination of urine was negative.

Supposing I had a case of myxœdema to deal with, I ordered the thyroid extract of Parke, Davis & Co., in doses of five grains twice a day. At the end of one week, patient was better but complained of some nausea, also pain in her back and legs. I decreased the extract to three grains twice a day, and kept it up until the middle of February, then reduced it to about two grains a day.

At the present time she considers herself well. I certainly never saw a more marked improvement in any patient. She eats well, sleeps well, and breathes well. Her vision is now all right with the lenses suited to her age.—*Boston Medical and Surgical Journal.*

FLUID EXTRACTS OR TINCTURES?*

The last edition of the Pharmacopœia furnishes an excellent text for protest against a class of galenical preparations which have long outlived their usefulness, and which are slowly but steadily giving way to products more modern, uniform, and precise. Need we add that our remark is aimed at the U. S. P. tinctures? The following list needs no commentary to expose their singular variations in strength:

Two represent 5 per cent. drug.
One represents 7 per cent. drug.
Thirteen represent 10 per cent. drug.
Nine represent 15 per cent. drug.
Twenty-two represent 20 per cent. drug.
One represents 35 per cent. drug.
One represents 40 per cent. drug.
One represents 50 per cent. drug.

This list comprises simple tinctures only, and does not include the various compound tinctures prepared from two or more drugs.

When to this lack of uniformity is added the further objection that the majority of tinctures are not convenient for administration—that they usually afford a small proportion of drug in a large proportion of alcohol—that the latter may not only influence the action of the drug but may also preclude combination with water or other vehicle—it may well be asked, by what means have tinctures contrived to hold their ground so long despite their objectionable features and their failure to present a single advantage not possessed by fluid extracts? The answer is simple. The majority of physicians now in active practice received their training in the days of the old-time tincture. Many practitioners yet look upon fluid extracts as an innovation. We may even assert without fear of contradiction that a great number of physicians refrain from discarding the tincture simply because they know from long habit the dose of the tincture, but have forgotten the dose of the drug. . . . . .

The tincture has outlived its usefulness, and should now be relegated to the attic of the obsolete. Medicinal preparations have enormously increased in number during the past generation; the memorizing of doses has become a formidable task, and it is high time that something were done to facilitate this work by wiping out a class of preparations whose members vary in a manner that has neither rhyme nor reason.

* Editorial in *Bulletin of Pharmacy.*

For Vertigo with Pain.—

℞ Normal liq. ergot, } ää 10 to 20 minims.
Potass. iod., }
Tinct. cannabis indica, 5 minims.
Mix. Sig.: To be taken in one dose.

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Gleanings.

Ten to twenty drops of normal liquid hyoscyamus, administered at bedtime, is said to be an excellent remedy in cases of seminal loss due to irritation or muscular atony.

In Sexual Impotence of Women.—

Ext. cannabis ind. (P., D. & Co.), } ää 3 ss.
Nux vomica (P., D. & Co.), }
Aqueous ext. aloes, gr. x.

Divide into 100 pills. Two or three daily.

In a paper read by John W. S. McCullough, M.D., before the Ontario Medical Association,* on "Artificial Feeding and the Care of Infants," Dr. McCullough recommends Cascara Cordial (P., D. & Co.) for regulating the bowels.

Menorrhagia.—

℞ Fl. ext. cannabis indica (P., D. & Co.), ♏ viij.
Normal liquid ergot (P., D. & Co.), fl. ʒ j.
Fl. ext. hamamelis (P., D. & Co.), } ää fl. ʒ ss.
Tinct. cinnamomi, }
Aq., ad fl. ʒ iij.

M. Two tablespoonfuls every three hours.

For Dry Cough.—

℞ Syr. tar, 1½ ounces.
Syr. wild cherry (P., D. & Co.), 1 ounce.
Syr. hydriodic acid (P., D. & Co.), 2 ounces.
Tr. capsicum, ½ ounce.
Mucilage of acacia, 1 ounce.

M. Sig.: Teaspoonful four times daily.

Chronic Bronchitis.—The following is a standard formula:

℞ Fl. ext. taraxacum (P., D. & Co.), }
Fl. ext. rhubarb (P., D. & Co.), }
Syr. senega (P., D. & Co.), } ää ʒ ss.
Tinct. tolu (P., D. & Co.), }
Sodium bicarbonate, ʒ j.

M.

Against External Hæmorrhoids.—

OINTMENT.

Cocaine hydrochlorate (P., D. & Co.), 6 grs.
Morphine sulphate, 6 grains.
Ext. belladonna (P., D. & Co.), ½ drachm.
Sol. lead subacetate, ½ fluidrachm.
Tannic-acid ointment, 3 ounces.
Stramonium ointment, 5 drachms.

Wash the part with water as hot as can be borne, for several minutes; dry, and apply the ointment freely. Repeat four times daily and after each stool.

Retention of Urine After Operation.—After surgical operations, especially those upon the abdomen or lower extremities, there is apt to be temporary retention of urine, due, perhaps, to actual shock, to paralysis, or to urethral spasm. Medical literature, as a rule, takes little note of this fact, and yet relief is quite simple, hot applications being usually all that is necessary, especially if applied to the region of the kidneys. Often frequent minute doses of normal liquid gelsemium answer every purpose.

Impotence.—When due to dilatation of the spermatic cords resulting from excessive masturbation, Dr. Floyd Royster recommends one teaspoonful of normal liquid ergot three times a day, to so contract the cords that they will become fixed. Also bromides to quiet nervous excitement; a general tonic of iron and arsenic; gentian and the mild chloride of mercury to keep bowels gently open. A case he had under this treatment continuously for two months, completely recovered and "is quite a happy man to-day, contemplating matrimony."—*Medical Age.*

The Composition of Chlor-Anodyne is as follows:

℞ Morphine hydrochlorate, 2⅝ grains.
Tinct. cannabis indica, 46 minims.
Diluted hydrocyanic acid, 9 minims.
Chloroform, 46 minims.
Oil of peppermint, } ää 1½ minims.
Tinct. capsicum, }

Sig.: Five minims for an adult, frequently repeated.

The above is certainly a good pain reliever and especially in bowel trouble.—*Kansas Medical Journal.**

The Evil of Proprietary Medicines.—Especially reprehensible is a habit which threatens to become more and more general—I mean prescribing proprietary medicines, particularly those that contain narcotics. By doing so the physician not only jeopardizes the physical and moral future of his patients who buy these vile compounds indefinitely, thinking they have struck the right remedy, but he helps to develop a branch of pharmacal industry which constitutes a crying evil. —Dr. Ludwig Bremer, in *Medical Fortnightly.*

Ustilago Maydis as an Ecbolic.—Dr. Viktorin Gruzeff, in *Vratch*, as the result of prolonged experiment arrives at the following conclusions:

Maize ergot is a most valuable uterine stimulant, and can be successfully resorted to in all stages of labor. Its effect becomes

* Published in *Medical and Surgical Reporter*, August 4, 1894.

* The genuine Chlor-Anodyne, as introduced by us, is furnished when prescriptions specify "Parke, Davis & Co."

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quickly manifest, usually within twenty-five or thirty minutes, never later than forty, the pains induced being of a physiological character—that is to say, they represent normal clonic contractions interrupted by regular pauses. The parturient tolerate corn ergot in an excellent way; and the remedy does not exhibit any harmful influence on the fœtus, nor does it in any way interfere in the normal course of puerperal involution of the uterus.

A brief period usually plays havoc with the liquid preparations of pepsin now on the market. The ferment is very sensitive to the influence of the ordinary preservatives, and is speedily weakened or destroyed.

Pepsin Cordial (P., D. & Co.) emphatically does not weaken with time: its potency is retained indefinitely. Its digestive power is unusual: one teaspoonful will dissolve two thousand grains of coagulated and disintegrated egg-albumen. In respect to palatability Pepsin Cordial leaves nothing to desire.

Happy results have followed its administration to infants and delicate persons suffering from vomiting and indigestion.

Full descriptive circulars, with sample, furnished on request.

Chekan.—It has been my privilege during the past winter to use the drug in several cases, in persons ranging in age from sixty to eighty years. It seems to be particularly adapted to those conditions following an acute inflammation of the air-passages, which take on the character and symptoms (except the elevation of the temperature) of phthisis pulmonalis in younger subjects. I usually prescribe the fluid extract in half-drachm doses, from four to eight times a day in a little simple syrup, or in the fluid extract of liquorice (which quite completely disguises its objectionable taste and at the same time acts favorably upon the inflamed mucous surfaces). It is especially beneficial in purulent bronchitis, and I have found it to act nicely in all chronic coughs, particularly when the bronchial passages *only* are involved. I would not use it in phthisis pulmonalis.—*Chicago Medical Times.*

Normal Liquid Ergot in Night Sweats.—The best drugs for the prevention of the profuse night sweats of phthisical patients are, according to Dr. Pouchard, sulphate of atropine, white agaric, and phosphate of lime. But there are cases in which the perspiration is so abundant that waste of tissue and debility ensue, and all remedies have hitherto seemed powerless. It is in these obstinate cases that ergot often proves of great value. Ten to fifteen minims of the normal liquid should be given at bedtime, or better still, half an hour before the sweat commences, and if necessary the dose may be repeated in two hours. The treatment should be persevered in for three consecutive nights, and the perspiration will be checked after the first or second day, the good results often continuing for one or two weeks. A subcutaneous injection may be substituted, if preferred, in one-third to one-half the dose. —*Medical Age.*

He has Tried Nearly Every Other Reputable Make.—Dr. J. W. Putnam, Lyons, N. Y., reports:* "I use Parke, Davis & Co.'s pepsin to the exclusion of all others; and I may say I have given almost every other *reputable* make a good trial, finding the P., D. & Co. product superior *in every instance.* . . .

"Some time ago an ex-Congressman came under my care. He had been taking large quantities of Pepsinum Purum Pulvis, prepared with sugar of milk 16 parts, pepsin 1 part, with the most satisfactory results, though previously skeptical as to the effects of pepsin, having taken Smith & Pitkin's, Fairchild's, etc., etc., with no benefit. On the score of family relations he requested that I use Armour's in place of the Parke, Davis & Co. pepsin. I sent him half a pound prepared in the usual way, but within a few days I received word to send him the P., D. & Co. product once more, as what he had was 'no good.'

"I have used Pepsin Cordial and find it as good as the powder. After an extensive experience I am satisfied there is none better, and often recommend it to my fellow practitioners."

Coca as an Aid in Cardiac Dropsy.—For obstinate cases of dropsy (cardiac), when digitalis, combined with the other diuretics, fails to start the secretion of urine, and the case is going on from bad to worse, I have found that in the presence of coca the diuretics take powerful effect. The urine is secreted abundantly, and the swollen legs and other parts are reduced to their usual size in two or three days. In a case of ascites, where there was much œdema also of the legs and scrotum, I drew off the abdominal fluid, but the enlargement of the abdomen returned in a few days. It was such a desperate case that it seemed hopeless; but the above treatment removed not only the dropsy in the extremities, but also the ascites. This was about eight months ago, and, rather to my surprise, there has been no return.

Up to about one year ago I had dreaded to

* July, 1894.

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take up a bad case of cardiac dropsy, but I now regard them with pleasure, for I feel that I have a sure hold on a difficult condition. P., D. & Co.'s elixir of coca acts better than some other preparations of coca.—FRANK VANALLEN, M.D., in Philadelphia *Medical World.*

Strychnine as a Cardiac and Respiratory Stimulant.—Dr. W. H. Washburn reports the case of a patient who had swallowed two ounces of chloroform with suicidal intent. The dilated pupils did not react to light; the respirations were exceedingly shallow, irregular, and scarcely perceptible; and he had the weak, uncertain and irregular pulse of a dying man. One-twentieth of a grain of strychnine was injected subcutaneously and artificial respiration practiced; one hour afterward one-sixtieth of a grain was injected. Complete recovery followed. It is believed that in strychnine administered hypodermatically we have a valuable remedy for the alarming symptoms which arise during surgical anæsthesia. In one instance where recovery from chloroform anæsthesia was marked by a blanched appearance of the patient, and almost imperceptible pulse, rapid improvement followed the subcutaneous injection of one-twentieth of a grain of strychnine.—*Therapeutic Gazette.*

Dialyzed Iron has been used with the happiest results as a tonic in anæmia, general weakness, hæmorrhages, leucorrhœa, loss of appetite, heartburn, indigestion, and convalescence from exhausting diseases. As an astringent it has been administered with marked benefit in dysentery, diarrhœa, the diarrhœa of cholera, chronic intestinal catarrh, and catarrh of the lungs. Its use has been attended with great success in the treatment of nasal catarrh, applied in the form of a spray, previously diluted with about ten parts of water.

As it does not exert a disturbing influence on the digestive apparatus, does not blacken the teeth, and is entirely assimilated, it has earned a well deserved popularity as a remedial agent in all cases where iron is applicable.

Externally it is valuable as a styptic; applied to wounds it promptly controls hæmorrhage, aids in the healing of abrasions, open sores, sloughing ulcers, and eruptions. It is eminently fitted for this purpose, as its mildness and lack of causticity render its application entirely painless. As an external remedy it is generally used pure or only slightly diluted. As an injection in gonorrhœa it has been used with good results; for this purpose it is diluted with an equal bulk of distilled water, gradually increasing the strength.

Dose: From five to thirty drops, according to indications. If distilled water is not obtainable, it should be but slightly diluted before administration.

We are well pleased with the excellence of our present product of dialyzed iron; and to any practitioner who wishes to test its virtues, we furnish samples *gratis.*

Any climate subject to rapid changes of temperature must needs be the prolific parent of catarrh, bronchitis, and other inflammations of the respiratory organs. In these inflammations, anodynes and stimulating expectorants are largely in demand; and we commend to our medical friends, as fulfilling important indications in the treatment of this class of affections, the combination of remedies which we have designated "Anodyne Pine Expectorant." Each fluidounce represents:

White pine bark, 30 grains.
Wild cherry bark, 30 grains.
Sassafras bark, 2 grains.
Bloodroot, 3½ grains.
Balsam poplar buds, 4 grains.
Chloroform, 4 minims.
Spikenard root, 4 grains.
Morphine acetate, $\frac{1}{16}$ grain.

Dose, one fluidrachm, increased as required.

This union of astringents, sedatives and stimulating expectorants will commend itself to the practitioner as a convenient resource for the treatment of affections of the throat and bronchial passages. It has been found of great service as a palliative for coughs and colds.

The value of the aromatic and resinous ingredients of balsam poplar (balm of Gilead) buds and sassafras has long been recognized. In the former we find benzoic acid and its derivatives; this acid has long ago found a permanent and useful place in medicine, as is witnessed by its employment in paregoric and various other remedies, either in a pure form or as a component of some of the ingredients used.

The irritant and expectorant properties of bloodroot are very happily conjoined with astringents which have the power of contracting the mucous exudations and thus loosening them from the membranes to which they are attached.

The sedative properties of chloroform, morphine and wild cherry here find useful application, enabling the preparation to be used in a large variety of affections.

In pulmonary difficulties it has been found useful as a palliative, besides being an excellent vehicle or corrective for cod-liver oil.

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Detroit, November, 1894.

To the Readers of Therapeutic Notes:

It is not the purpose of this little journal to play the role of an oracle in therapeutics. It seeks simply to serve as a distributing medium for a large fund of new therapeutic material which comes to us--much of it unsought--in letters, in reports, in the volumes constantly added to our extensive library, and in the host of medical journals to which we subscribe.

How many of its recipients find in the little journal the value which we claim for it?

How many desire to receive it regularly, no charge being made?

Are there any practitioners who lack leisure for reading the journal, and would accordingly prefer to have it discontinued? If there be such, we invite from them a frank expression.

The coupon which appears below will, we trust, be read, filled out and mailed to us by every recipient of this journal. Accompanying it we shall be pleased to receive any suggestions, comments or criticisms which may enable us to increase the value of future issues.

Respectfully,

Parke, Davis & Co.

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Parke, Davis & Co.,
Detroit, Mich.:

Understanding that you purpose to continue the publication of Therapeutic Notes and to send future issues without charge to all medical practitioners who make application therefor, I herewith request that my name be inscribed on your mailing list.

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FIRST to overcome its objectionable bitter taste, in Cascara Cordial, introduced in 1879.

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Fluid Saw Palmetto Compound.

EACH FLUIDOUNCE REPRESENTS EIGHTY GRAINS FRESH SAW PALMETTO BERRIES, TWENTY-FOUR GRAINS KOLA NUT, AND TWELVE GRAINS EACH OF PARSLEY SEED AND COCA, COMBINED WITH AROMATICS.

As is well known, Saw Palmetto is one of the best of our restoratives. It is not only a nutrient tonic valuable in its aid to digestion and assimilation, but possesses a special vitalizing action upon the glands of the reproductive apparatus, viz.: the uterus, mammæ, ovaries, prostate, testes, etc.

Kola is highly prized for its stimulating and sustaining qualities due to Caffeine and Theobromine. Its value in depressed condition of the nervous system has long been established.

Parsley Seed has attained an enviable reputation as an aperient, tonic, emmenagogue, and general sedative to the genito-urinary tract. It has a special tendency to regulate the functions of the reproductive apparatus regardless of sex.

Coca, too, is a stimulant, nutrient, and digestant. There is perhaps no remedy in the Materia Medica that when moderately used is so successful in restoring the function of assimilation.

A sample, together with specimens of three other seasonable preparations, will be promptly forwarded should you not object to the expressage.

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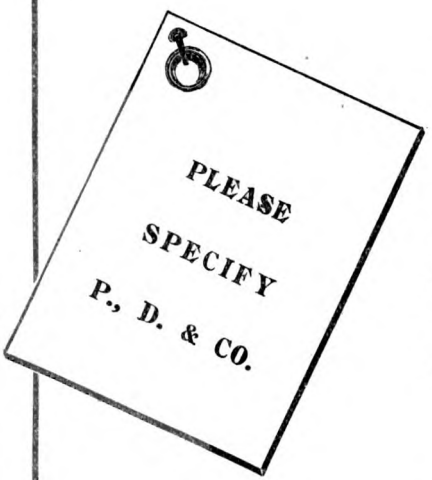
In the formula are embodied sedatives and expectorants happily conjoined with astringents, thus rendering the preparation of value in hardening mucous exudation, thereby loosening it from the membrane to which it is adherent. A palliative for coughs and colds. Of value in the treatment of bronchitis and other inflammations of the respiratory organs.



BRONCHIAL SEDATIVE.

Widely used in the hospitals of this country and Europe in the treatment of simple uncomplicated bronchitis. It is exceptionally palatable, and therefore more readily taken by children than the nauseous expectorant mixtures so often given.

SYRUP HEMATIC HYPOPHOSPHITES.

Each fluidounce contains Potassium Hypophosphite, 1½ grains; Manganese Hypophosphite, 1 grain; Strychnine Hypophosphite, ⅛ grain; Ferrous Hypophosphite, 1¼ grains; Calcium Hypophosphite, 1 grain; Quinine Hypophosphite, $\frac{7}{16}$ grain.

This combination of remedies is one adapted to a great variety of diseased conditions. It is likely to prove useful wherever there is debility or depraved nutrition, but is especially appropriate in cases of anæmia, nervous prostration, and in tubercular affections.

SYRUP HYDRIODIC ACID, 2-PER-CENT.

This preparation possesses many advantages. While it enables the prescriber to administer Syrup Acid Hydriodic of the U. S. P. by simply diluting one-half, it at the same time permits increase of dosage in any proportion and more rapid absorption of medicament. It is often desired to saturate, so to speak, the economy of the patient with the iodide, a procedure that is greatly facilitated by its increased strength, which means likewise decreased attention to administration. The new preparation is of light color, absolutely permanent, and possessed of no free iodine, as evinced by the fact no change to blue is obtained by the addition of gelatinized starch.

Of its therapeutic properties and possibilities, it suffices to say it has proved of excellent value in the treatment of acute rheumatism, senile bronchitis, and certain forms of asthma; moreover, it is specially indicated in fevers of septic type, in gout, and in various forms of phthisis.

Samples to physicians who will indicate their willingness to defray expressage.

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CATALOGUED
SEP 18 1900
J. F. B.

THERAPEUTIC NOTES.

PUBLISHED BY

PARKE, DAVIS & COMPANY.

SECOND YEAR. DETROIT, MICH., MARCH, 1895. No 1

BOSTON MEDICAL LIBRARY JUN 20 1905

Diphtheria Antitoxin.

We beg leave to direct the special attention of the Medical Profession to our ability to furnish on demand supplies of Diphtheria Antitoxin, prepared in accordance with the process of Behring and Roux and under the direct supervision of eminent bacteriologists. See page 2 of this journal.

Culture Media.

We are supplying from our Bacteriological Department a complete line of the various Media [sterilized] for the propagation of bacteria. Full description, including prices, will be found in the text of this journal.

Nuclein Solution. (Formula of PROF. VAUGHAN.)

We invite attention to the favorable reports on this highly promising therapeutic agent, now appearing in current medical literature. Reprints of papers furnished on application. See advertising page IV.

Improved Lofoten Cod-Liver Oil.

A highly refined Norwegian oil, prepared by special process from fresh livers on the scene of the fisheries. Free from objectionable taste or odor, and absolutely devoid of putrefactive alkaloids or ptomaines. Issued in 12-oz. bottles.

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Specially Valuable in all Depressed Conditions of the Muscular and Nervous Systems.

SYNONYMS . . . . . Guru (also Goora, Gourou), Kokkoroku, Makasso, Ombéné, Nangoué. *Tropical Africa;* Bichy, *W. Ind.;* Noix de Kola, Noix de Gourou, Noix du Soudan, Café du Soudan, *Fr.;* Kolanuss, *Ger.;* Cola de Africa, Cola de Sudan, Nuez de Kola, *Span.;* *Sterculia acuminata*, Pal. de Beauvois.

PART EMPLOYED . . The seeds.

NATURAL ORDER . . Sterculiaceæ.

HABITAT. . . . . . Western tropical Africa.

PROPERTIES. . . . . Kola resembles in its action guarana and coca, and is said to have almost a specific effect in combating the intoxicating influence of alcohol. It is employed also in diarrhœas, and in all depressed conditions of the nervous system where caffeine is ndicated. Dr. Bernard Schuchardt, of Gotha, author of a most exhaustive work on Kola, thus concludes with regard to ts medicina l properties: "Kola should accordingly be employed as a diuretic in heart disease, and especially in conditions of feeble heart; in neuralgias; in severe fevers of adynamic character and during the period of convalescence after the latter; in exhausting diseases; in dyspepsias; chronic and obstinate diarrhœas; in cholera; and finally, as an excitant and exhilarant in cases of mental depression."

PREPARATIONS . . . Fluid Extract Kola; Solid Extract Kola; Normal Liquid Kola; Kola Cordial (120 grains Kola to fluidounce); Kola Wine; Elixir Kola Compound (40 grains Kola, 40 grains Coca, 40 grains Celery, to fluidounce); Compressed Tablets Kola (5 and 10 grains).

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Should you desire samples of any four (4) of the following preparations (*each in sufficient quantity for practical investigation*), check the four (4) desired, sign your name and address, cut this page out and mail to us. The package will be immediately forthcoming.

INDICATE BY CHECK (√) THE FOUR (4) PREPARATIONS DESIRED.

Liquor Sedans.

A utero-ovarian sedative representing Black Haw (Viburnum prunifolium), Golden-Seal (Hydrastis canadensis), and Jamaica Dogwood (Piscidia Erythrina). Most serviceable in a very large class of cases of dysmenorrhœa, ovarian irritability, and irregularity of the utero-ovarian functions.

Syrup Trifolium Compound.

A specific alterative, beneficial in the treatment of conditions indicative of a scrofulous diathesis, also in those of a specific nature and in their sequelæ.

Syr. Hematic Hypophosphites.

A reliable and palatable tonic in the debilitated conditions in which the preparations of the hypophosphites are usually prescribed.

Glycerin Suppositories.

Described and illustrated on advertising page 5.

Fluid Cascara Aromatic.

A more palatable preparation than either our regular or "formula 1887" fluid extract.

Euthymol.

A non-poisonous and non-irritant liquid antiseptic, of wide utility in any form of administration, whether internal or external. We manufacture Euthymol Tablets, an excellent buccal deodorizer and disinfectant.

Normal Liquid Ergot.

This is a standardized preparation that can always be depended upon in the emergencies for which ergot is generally used.

Saw Palmetto Compound.

A combination of restoratives, stomachics and aromatics, calculated to restore appetite, regulate function, and stimulate secretion, especially in cases of digestive and sexual debility due to the lack of assimilation or functional irregularity.

Pepsin Cordial.

A highly concentrated fluid containing all the elements essential to gastric digestion, and surpassing in potency the elixirs, essences and wines of pepsin commonly met with in the market, while its flavor and general palatability will be found unexceptionable.

Esencia de Coca.

Coca stands preëminent among the remedies that are of service wherever neurasthenia or the effects of overtaxing the nerve elements of the body are manifested. The aromatic character of the vehicle will commend itself.

Syrup Iron Chloride (Weld).

A palatable and efficacious preparation of the tincture of ferric chloride. It has no corrosive action on the teeth.

Lime-Juice and Pepsin.

A most efficient aid to digestion, by virtue of the potent pepsin and superior quality of lime-juice embodied therein.

Esencia de Calisaya.

A tonic, stomachic, and, to a lesser extent, an antiperiodic. In the convalescent stage there are few cases to which it is not applicable. "Particularly useful in atonic dyspepsia," and a valuable adjunct in the treatment of the liquor habit.

Kola Cordial.

See our advertisement on opposite page.

.....*1895.*

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Nuclein Solution.....

FROM YEAST.

PREPARED ACCORDING TO THE FORMULA OF

VICTOR C. VAUGHAN, M.D., PH.D.,

Professor of Hygiene in the University of Michigan.

NUCLEIN is a non-poisonous germicide, found in various vegetable and animal cells, also in blood-serum, the bactericidal properties of which are due to this constituent. It increases the number of white blood-corpuscles and stimulates the activity of those organs whose function it is to protect the body against infectious diseases. It has been used with benefit in indolent ulcers, membranous tonsillitis, streptococcus diphtheria, and in *initial* cases of tuberculosis.

Dose—20 to 60 minims hypodermatically.

WRITE FOR REPRINTS OF PAPERS BY

PROF. VICTOR C. VAUGHAN, M.D., Ph.D., and CHARLES T. McCLINTOCK, Ph.D.

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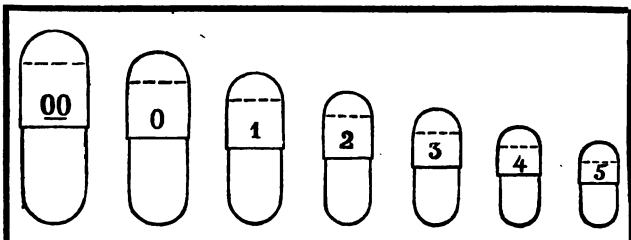
Empty Capsules....

AIDS TO PRESCRIBING.

A moment of reflection will convince the most skeptical that the capsule is very easily dissolved—scarcely does it reach the stomach ere the lesser portion, which forms the cap, begins to swell and curl backwards upon itself, when, almost immediately, it releases the medicament in a form to be readily dissolved and assimilated.



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ABSOLUTE PROTECTION AGAINST
LEAKAGE.

The Means par excellence for the Administration of Nauseous Remedies.

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THERAPEUTIC NOTES.

SECOND YEAR. DETROIT, MICH., MARCH, 1895. No. 1

Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department
PARKE, DAVIS & CO.,
Detroit, Mich., U. S. A.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

Editorial.

TO THE READERS OF THERAPEUTIC NOTES.

During the past year four issues of THERAPEUTIC NOTES have been mailed at irregular intervals to the entire body of medical practitioners in the United States and Canada. Their receipt has been acknowledged by thousands of readers, and we have been assured in emphatic language that the brief, practical articles and paragraphs of our little journal render it most useful and interesting.

The intelligent physician surely realizes the chasm yawning between a common factory and a modern pharmaceutical laboratory; the latter is a great reservoir fed by a constant stream of information—from scientific journals and books, from the original researches of medical and chemical authorities, from the correspondence of the practitioner whose daily experience forms the court of last appeal in determining the merit of therapeutic agents. Speaking editorially, the *Journal of the American Medical Association* recently declared: "In the particular realm to which he [the manufacturer] devotes himself, he has few superiors in practical chemistry. . . . The time has come when the vast stock of chemical and pharmaceutical knowledge stored in these great laboratories must be made available to the American profession."

During 1895 the NOTES will be mailed only to the medical men who have *in the past* expressed their desire, through coupon or letter, to receive the journal, or who may *now* deem it worth while to fill out the *coupon facing page 24* of the text. The present issue —unless special occasion should arise—will be the last generally distributed. Over ten thousand coupons were cut out from the last number and mailed to us, and each day continues to bring us a number. If you have not already done so, cut out the coupon from this number and mail it to us. You will surely agree with us that what is worth having and reading is at least worth asking for.

The following opinions of the NOTES, received without solicitation, selected at random, and *published by permission*, require no key:

J. N. Bishop, M.D., New York City: Allow me to thank you, as one of the members of my profession, for giving us your THERAPEUTIC NOTES. The November number has given me information equal in value to a year's subscription for some medical journals.

J. C. Beck, M.D., Cincinnati: Accept my thanks for this favor.

Drs. Dillon & Dillon, Rushville, Ind.: We like Parke, Davis & Co.'s goods and cannot do without the THERAPEUTIC NOTES.

A. E. Freeman, M.D., Inverary, Ont.: Your THERAPEUTIC NOTES contain many valuable hints.

John T. Hunt, M.D., Macedonia, Ill.: A welcome visitor; thanks.

Franklin I. Kaufman, M.D., Syracuse, N. Y.: It is very good as it is; can offer no suggestions and make no criticisms.

S. J. Liggett, M. D., Philadelphia: The articles are excellent and good reading.

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F. Bartow McRae, M.D., Atlanta, Ga.: It is too good not to have regularly.

Dr. Chas. Nedskov, Sorrento, Fla.: Too valuable to do without.

J. V. Stevens, M.D., Evanston, Ill.: I read it with much interest and profit.

D. G. Terry, Marguam, Oregon: I have received many a good idea from the NOTES.

H. Young Westbrook, M.D., Baltimore: It is a perfect gem.

As life is short and space precious, we refrain from quoting more from the mass of gratifying praises which have been lavished on the NOTES.

DIPHTHERIA ANTITOXIN NOW FURNISHED ON DEMAND.

We are happy to announce our ability to supply on demand quantities of Diphtheria Antitoxin. Orders therefor will receive our immediate attention.

Our own Bacteriological Laboratory began its work last October. Owing to the length of time required to obtain a potent serum, we shall not be able to supply material of our own production until April or May. Meantime we have perfected arrangements for a supply of Diphtheria Antitoxin prepared under the supervision of Ira Van Gieson, M.D., and Nelson L. Deming, M.D., the well known bacteriological experts of New York City, and issued under their certificate of quality and strength.

This Diphtheria Antitoxin is prepared from horses after the method of Behring and Roux, and conforms to the conditions demanded by the ordinance of the Board of Health of New York City. The product is absolutely sterile, and will be supplied in vials of 10 cubic centimeters each, bottled and sealed according to the most approved methods.

This Diphtheria Antitoxin will be furnished in three different grades of strength, as follows:

1. A weaker serum which will contain 600 antitoxin units, for *immunizing* purposes and for the treatment of mild cases. Each vial will bear a BLUE LABEL; price per vial, $1.90, strictly net cash.

2. A stronger serum of 1000 antitoxin units, for *curative* purposes, and which is of sufficient strength for the great majority of cases. Issued under YELLOW LABEL; per vial $3.50.

3. A still stronger serum of 1500 antitoxin units, for exceptionally severe cases, or cases in which, on account of delayed treatment, complications or severe toxæmia have appeared. Issued under GREEN LABEL; per vial, $5.25.

We shall, however, for the present, carry a limited supply of this strongest grade of serum, as practical experience has thus far shown that its application is necessary only in a small proportion of cases, and that its preparation is extremely difficult.

Orders may be sent to our Detroit address; our New York City office at 90 Maiden Lane; our branch at 1008 Broadway, Kansas City, Missouri; or our Laboratory at Walkerville, Ontario.

***

It is needless for us to add that we have the most implicit confidence in the scientific competence and probity of the gentlemen supervising the production of this Diphtheria Antitoxin. We unhesitatingly offer it to the medical profession as possessing a measure of potency which renders it fully as reliable as any diphtheria antitoxin now prepared.

PROF. LOEFFLER'S SOLUTION FOR THE LOCAL TREATMENT OF DIPHTHERIA.

Prof. Dr. Loeffler, the distinguished scientist, has long been seeking a preparation capable, when locally applied, of exerting the most prompt and potent action attainable, in destroying the diphtheria germs. According to a paper read by Prof. Loeffler at the last (1894) International Congress for Hygiene and Demography, held at Budapest, ninety-six cases were treated by him topically; three-quarters were proved by bacteriological examination to be diphtheria; and not a single case was lost. On staphylococci and streptococci the remedy does not act so speedily as on diphtheria germs.

Prof. Loeffler prepares the solution as follows:

Menthol, 10 grammes.
Toluene, enough to make 36 Cc.

Then add:

Creolin, 2 Cc.
Iron-chloride solution, 4 Cc.
Alcohol, to 100 Cc.

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Mode of application: First the mucus is wiped off from the affected portions of the throat by means of a small pledget of cotton in a holder. Then a pledget of absorbent cotton, saturated with the solution and grasped with a suitable forceps, is pressed firmly against the diphtheritic membrane for ten seconds, and this application must then be immediately repeated. The applications are to be continued every three hours for four or five days, when all the local symptoms will probably have vanished.

Manifestly the therapeutic use of serum (antitoxin) is not at all affected by this treatment.

In the *Berliner Klinische Wochenschrift* of November 26, Dr. Paul Hilbert, Privatdocent and First Assistant at the Polyclinic at Königsberg, Germany, states in his report on the results of the experiments made with the diphtheria serum at the Polyclinic, that the dietetic treatment must be maintained simultaneously with the injection of serum. He further states that *the local therapy must not be neglected;* for which purpose the mixture of toluene, alcohol, iron-chloride solution, creolin, and menthol, known as Loeffler's Solution, seems to be the formula best adapted.

Loeffler's Solution is put up by us in 1-pint, ½-pint, and ¼-pint bottles.

CONTRIBUTE YOUR EXPERIENCE.

There are probably no half-dozen medical journals in the United States whose combined circulation begins to equal that of THERAPEUTIC NOTES. During 1894 each issue has been sent to every physician in the United States and Canada.

We shall be very glad to receive from the readers of the NOTES short articles on the treatment of diseases, on new agents or on new applications of old remedies. Such contributions, however, should be stripped of verbiage and expressed in the fewest words compatible with clearness. The NOTES are issued bi-monthly at the most, and the limited space is exceedingly precious. The articles presented in this issue, for example, are compressed until each one would bleed if you cut it. They are designed for the busy practitioner who must read as he runs.

The terse description of a single case, embodying a useful suggestion for treatment, or illustrating the value of some new remedy, may be made highly instructive, and such communications will reach a larger circle of readers through the NOTES than through any other one medium. Will you not contribute your experience for the benefit of your fellow-practitioners?

ANTITOXIN, AND OUR OWN FACILITIES FOR ITS MANUFACTURE.

In announcing on another page our ability to furnish forthwith supplies of a reliable Diphtheria Antitoxin, we made a passing reference to our own product, which will soon be in readiness for the market. With this end in view, last October we organized and thoroughly equipped a Bacteriological Department, with a complete laboratory, incubators, and animal-rooms.

In the laboratory are grown and tested the pure cultures of Loeffler's diphtheria bacilli, which are used for the inoculation of guinea-pigs with diphtheria and for sowing in flasks of peptone bouillon. These flasks are then placed in an incubator, kept at the temperature of the body, and remain there for several weeks, to allow the bacilli to multiply and produce the toxins which are employed in immunizing the horses that produce the antitoxin. The virulence of the toxins is tested by injecting definite amounts into guinea-pigs. If the toxins prove to be of the required strength, they are then, in repeated, gradually increased doses, injected into the horses. After the horses have been treated for about three months, small amounts of blood are drawn into sterilized flasks. The serum, which contains the antitoxin, is allowed to separate, and its therapeutic value is determined by treating guinea-pigs which are simultaneously inoculated with pure cultures of true diphtheria bacilli.

By this method of physiological testing, data are obtained from which the antitoxin is standardized, so that a given quantity of any particular strength will always have the same curative value.

As the immunizing process goes on, we find it necessary to enlarge our incubator space in order to provide sufficient room for

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SEE FIRST EDITORIAL, ALSO COUPON FACING PAGE 24.

the flasks in which the toxins are developed. In order to meet this demand we are having a mammoth incubator built, probably the largest in existence—a cube ten feet on an edge, and representing several tons of steel, glass, asbestos, etc.

For the production of the antitoxin, only young, perfectly healthy, unbroken horses are used; these were selected and are looked after by an experienced veterinary surgeon. The horses are accorded every comfort, being as well cared for as human patients in our hospitals.

The department is in charge of Chas. T. McClintock, A.M., M.D., Ph.D., and E. M. Houghton, Ph.C., M.D. Both gentlemen are from the University of Michigan, at Ann Arbor.

NUCLEIN AND NUCLEINIC ACID.

These words, nuclein and nucleinic acid, have been and probably will continue to be used synonymously. Strictly speaking, nuclein seems to be a combination of nucleinic acid with albumen. By treatment with acetic acid the albumen is precipitated while the nucleinic acid goes into solution, but when the latter comes again in contact with albumen it recombines with it to form nuclein.

The germicide element in the blood has been shown to be a nuclein. Nuclein is both germicidal and antitoxic, destroying in the body both bacteria and their poisons. Nuclein is dissolved by alkalies and precipitated by acids and by alcohol.

On the above facts is based nuclein therapy. The nuclein given by injections probably has but little direct germicidal or antitoxic power, but it seems to stimulate the nuclein-forming tissues of the body, and probably thus, being closely allied to the nucleins of the body, it serves as a readily assimilable food. When, for example, yeast-nuclein is given hypodermatically, it may be at once converted into the nuclein of the white blood-corpuscle, or spleen, and then in turn destroy the invading germs and their products.

The results of the administration of nuclein in tuberculosis have been remarkably good. It has also been used with good effect in tonsillitis, streptococcus diphtheria, and indolent ulcers. The use of nuclein is rational, not empirical therapy, and the results thus far reported indicate that it will have a wide field of usefulness.

Solutions of nuclein have been used of various strengths. As a result of these experiments the 1-per-cent. solution has been shown to be the most satisfactory. Stronger solutions cause too much local irritation, while weaker ones have to be given in such large doses as to be objectionable. The dose of the 1-per-cent. solution is from ten to sixty minims.

Write for reprints of published papers.

NUCLEIN THERAPY—A CRITICISM.

In an interesting article on Diphtheria, published in the January number of the *Physician and Surgeon*, Dr. Collins H. Johnston, of Grand Rapids, Mich., finds fault with us for recommending the local use of Nuclein in streptococcus diphtheria.

In answer to this criticism we desire to state that Dr. Vaughan is responsible for the statement that "Nuclein has proved of value in the treatment of streptococcus diphtheria." We referred the matter to Dr. Vaughan, and he wrote us as follows: "I am responsible for the use of the term 'streptococcus diphtheria,' and I am willing to leave the question as to whether or not it would be likely to deceive any competent bacteriologist and lead him to suppose that Nuclein was recommended for the Loeffler bacillus diphtheria."

For the information of our critic we may state that in 1889 Prudden reported twenty-four cases, believed by him to be diphtheria, in which "the bacillus of Loeffler was not found; but a streptococcus, apparently identical with streptococcus pyogenes, was found in twenty-two."

"These forms of so-called diphtheria are most commonly associated with scarlatina and measles, erysipelas, and phlegmonous inflammation, or occur in individuals exposed to these diseases; but whether exclusively under these conditions is not yet established." (Prudden.)

As stated above, Prudden thought that this streptococcus was the true cause of diphtheria; he afterwards acknowledged his

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mis'ake. Since the publication of Prudden's paper the diseases which he described have been known as "streptococcus diphtheria," and although there are obvious objections to the term it is in daily use in current medical literature.

HÆMINAL—A NEW BLOOD-IRON ALBUMINATE.

The introduction of blood into therapy was based upon the fact that it had been proved that inorganic iron-compounds are assimilated by the organism in but very small quantities, being nearly all eliminated unabsorbed. It had also been established that the organic iron-compounds in particular furnish the indispensable material for the formation of hæmoglobin; and the natural sequence was the introduction into the materia medica of organic iron-compounds, such as iron-albuminates, iron-peptonates, iron-saccharates, etc., etc. It is obvious that such organic preparations of iron as are directly related to the hæmoglobin are the most serviceable in producing red blood-corpuscles.

In combating chlorosis and anæmia — diseases usually accompanied by dyspeptic troubles and want of appetite — an iron-albuminate preparation is demanded which will supply the organism with all the essential constituents contained in the blood, in a soluble, non-coagulable form, and hence very easily assimilated. Such an iron-albuminate would also be absorbed by a deranged stomach.

We have therefore sought an iron-albuminate which would contain in a soluble form all the albuminates and salts (hæmoglobin, paraglobin, serumglobin, phosphates) present in the blood, without, however, any of the objectionable excretory products (fibrin, urea, etc.); and under the name of "Hæminal" we offer the medical profession a medicament that fully answers all these requirements. Hæminal contains 0.25 to 0.30 per cent. of metallic iron in the form of hæmoglobin and hæmatin. It is a dark brown powder of a slightly acid taste, fairly soluble in cold water, and easily soluble in hot water without being coagulated. It may be further added that Hæminal is freely soluble in diluted alcohol — a most desirable property, since it renders its administration possible with alcohol-containing restoratives (as wines, etc.). It is perfectly stable, and one part corresponds to about six parts of fresh healthy bullock's-blood.

Hæminal will be found of excellent service in the management of chlorosis and anæmia, as well as in rachitic and scrofulous conditions, neurasthenia, and the digestive troubles that accrue to convalescence, etc. Hæminal may be specially recommended in cases where other iron albuminates have proved unsuccessful; of signal importance is the large amount of soluble albuminous matter it contains.

Hæminal may be administered in doses of eight to sixteen grains, three to five times a day—preferably in the form of gelatin capsules, or dissolved in warm water.

THE "REVIVAL" OF KOLA.

During the past year, at suspiciously regular intervals, the "wonderful virtues of Kola" have been proclaimed in various sensational ways calculated to appeal directly to the curiosity of the great lay public. The Associated Press dispatches, the daily newspapers, the display windows of prominent drug stores, and other means, have been energetically utilized, all "for the benefit of the gallery"—the general public — assuredly not for the edification of the medical profession. To accept the sensational claims thus made on behalf of Kola involves the belief that the drug is a jag-cure, a heart-panacea, a sure cure for diabetes, an astringent and cathartic, a sudorific and depressant, a marvellous stimulant, and that a brilliant medical discovery has been reserved for the end of the century.

Be Kola what it may, it is certainly no novelty. For centuries the Kola nut has been a common article of barter in Central Africa. For centuries it has been carried by African and Mohammedan merchants into remote districts beyond the Sahara, and for decades the Kola nut has been sold in the markets of the Mediterranean. In 1865 analyses of Kola appeared in the *London Chemical News* and (from the pen of John Attfield) in the *American Journal of Pharmacy*. Over ten years ago we collated all the data on Kola, then existing, into our Working Bulletin, and introduced a number of its pharma-

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ceutical preparations to the medical profession. So much for its "novelty."

Now as to its medicinal value: the Kola nut, Maté or Paraguay tea, guarana, coffee, tea, cacao, all possess in common a number of properties, sustaining, stimulating, and invigorating. For Kola special claims have been made, alleging its efficacy in conditions of feeble heart; in neuralgias; in severe fevers of adynamic character and in subsequent convalescence; in dyspepsia; in chronic and obstinate diarrhœa; in cholera; and finally as an exhilarant in mental depression. But we have by no means the amount of clinical evidence required to establish Kola as a recognized therapeutic agent. The drug is yet on trial, and while it seems to possess useful properties, the medical profession is not likely to be prepossessed in its favor by bill-board advertising to a credulous public.

It must be further considered that Kola has many analogues. Almost every one of its properties is present, in equal or greater measure, in some other drug which is more accessible or more economical.

We are perfectly willing to place in the hands of any physician a quantity of the pharmaceutical preparations of Kola for experiment. Our illustrated brochure (distributed only to the profession) contains much interesting information about Kola—historical, botanical, chemical, and therapeutical—and will likewise be furnished on request. For our own part, while we consider that Kola is useful and well worth trying, we repudiate utterly the extravagant, sensational claims made by certain of its exploiters.

A Hint in Prescribing.—Now that the price of empty capsules has become so greatly reduced that they are within the reach of all, even the country practitioner, they should seemingly form as much a part of the armamentarium therapeuticum of the physician as the pocket-case or hypodermic syringe. Why cause patients to "swallow a bitter pill" in the form of a compressed tablet or tablet triturate, when the taste of such may be effectually masked by enclosing in our popular gelatin capsule? The disguising of the taste, moreover, entails no sacrifice of speedy efficacy, as the gelatin dissolves quickly and exposes its contents to the action of the stomach.

THE INDEX MEDICUS.

Under the direction of Dr. John S. Billings, U. S. A., and Dr. Robert Fletcher, a corps of men are constantly employed, in the library of the Surgeon-General at Washington, classifying and indexing the current medical literature of *every land and every language.* The fruit of this work is embodied in a monthly journal, published under the name of the *Index Medicus* by Mr. George S. Davis, of Detroit.

"The *Index Medicus,*" says Dr. William Pepper, "is simply a necessity for every student of medical literature, for every medical teacher, even for every medical practitioner who wishes to keep abreast with the progress of his art." The London *Lancet* declares: "Its discontinuance would be almost a calamity for every intelligent student and practitioner of medicine. . . . It is a marvel of accuracy and completeness." A host of distinguished professional men and influential journals, European as well as American, have repeatedly declared the *Index Medicus* to be an honor to American medicine and scholarship.

Every year since Mr. Davis became publisher, the *Index Medicus* has shown a deficit, owing to the limited number of practitioners willing to pay the subscription price—$10.00 a year. On account of the depression in financial matters, and the tardiness of many subscribers in making payment, the deficit has now increased to a point where the journal must POSITIVELY be discontinued, unless the profession lend it their favor. Mr. Davis is willing to forego a profit on the enterprise, but he has long enough borne the burden of an increasing loss.

The subscription price is reasonable when it is considered that the journal is a most expensive one to publish, and that it can never command more than a limited circle of subscribers.

The publisher will gladly send specimen copies on application, and we earnestly bespeak for the *Index Medicus* the financial support of the many who would certainly suffer from the loss of so valuable an aid to medical research. Address Geo. S. Davis, Medical Publisher, Detroit, Mich.

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LAUDER BRUNTON'S DICTUM RESPECTING COD-LIVER OIL.

The views expressed in the interesting article on another page from the pen of Dr. Edgar F. Billings bear out the famous dictum of Lauder Brunton that the therapeutical use of cod-liver oil "depends on two properties —its ready absorption and its ready assimilation." They also sustain our own contention that preparations of extracts from the oil are a delusion and a snare. Cod-liver oil is preeminently a readily assimilated food, and the *entire* oil, in its integrity, must be administered to yield the desired results, reconstructive and invigorant.

Being used by invalids and by the feeble, cod-liver oil must be free from repelling physical qualities—it must not offend the taste, the sight, or the smell. These requirements are fully satisfied by the Improved Lofoten Cod-liver Oil, P. D. & Co., which is a pale, clear, bland product, and represents the finest quality of oil as obtained from the fresh livers on the very scene of the famous fisheries. Our Improved Lofoten is admirably suited to prolonged administration. We bespeak a careful reading for the article by Dr. Carl E. Conn, Demonstrator of Experimental Therapeutics, Iowa State University, and we beg leave to emphasize his statement: "In all these cases and experiments Parke, Davis & Co.'s Improved Lofoten Cod-liver Oil was used, and not in a single instance was it found difficult to administer, *or to tend in any degree to nausea.*"

NO REDUCTION IN QUALITY.

The exceedingly low rates at which our tablet triturates and compressed tablets are marketed—rates far below those of any other manufacturer—have compelled rival makers to bestir themselves energetically in the effort to retain their trade. One of the first expedients suggested for this purpose was to cast suspicion on the quality of our tablets, and to declare that we were sacrificing quality to cheapness; that we could not manufacture reliable goods at such low prices, etc., etc.

It is needless for us to say that this insinuation is entirely without foundation. In the production of tablet triturates, as of every other line of pharmaceutical preparations issued from our laboratory, we use only the highest grade of material obtainable, and we exercise the utmost care and skill at our command. Despite our sweeping reduction in prices we are still enjoying a moderate but to us satisfactory margin of profit—thanks to our great capacity and the enormous volume of our trade. Besides, we have too much at stake in our general reputation to run the risk of besmirching our label for the sake of a temporary profit on only one of our numerous lines.

We realize that tablets *per se* do not always offer the best means of medication, and that they deteriorate more readily than other pharmaceutical products; but we contend that our tablets are made as well as it is possible to manufacture this class of goods at the present time. Samples for trial we promptly furnish.

NUMBERING TABLETS.

A certain exclusive manufacturer of tablet triturates is striving by correspondence and advertisement to make a point against Parke, Davis & Co., by republishing the views of Dr. Geo. W. Miles as expressed in the New York *Medical Record* of Sept. 1, 1894, with reference to the numbering of tablet triturates. In this connection the following correspondence may be of some interest:

(LETTER.)

SEPT. 6TH, 1894.

DR. GEO. W. MILES,
11 Cherry St., Oneida, N. Y.

Dear Doctor: Our attention has been called to your article in the *Medical Record* entitled, "Concerning the Tablet Triturate," and we write to direct your kind attention to the fact that, in accordance with the expressed views of a number of physicians, we have, since the 20th of June, discontinued stamping numbers upon our tablets. Our action in numbering them in the first instance was based entirely upon what seemed to be a desirable point from the doctor's own view, whose interests we always try to serve.

Assuring you of our best regards, we remain,
Yours very truly,
PARKE, DAVIS & CO.

(REPLY.)

SEPT. 7th, 1894.

MESSRS. PARKE, DAVIS & CO.,
Detroit, Mich.

Gentlemen:—I have just received your kind favor of the 6th, regarding my communication to the *Medical Record*, "Concerning the Tablet Triturate." I hope that nothing in that communication

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seemed to be intentionally written as in any manner disparaging to your house. Such a thing would have been the farthest from my thoughts. I have for many years been one of the warmest supporters of your house and a very extensive user of your goods. I have been a warm admirer of the ethical methods of manufacture of P., D. & Co., and have not hesitated to say so on many occasions. I simply did not believe in numbering tablets, and that was all the idea I meant to convey. I am much pleased to know that you have abandoned the method. I had seen no announcement of the fact, and your letter first gave me information of that. I bought some triturates (P., D. & Co.) of ipecac, but a few days ago. They were numbered, so I suppose must have been old stock of my druggist's. I like the compressed tablet and the triturate form of using medicines. I hear a great deal from agents of rival houses, about the dangers of evaporation and the insolubility of tablets, but I am as sure as of anything in medicine, that *I get good results* from that form of medication, *and especially in the goods of P , D. & Co.* I have always felt a little doubtful about the tinctures, fluid extracts and fluids generally, in tablet and triturate form, but in the matter of dried drugs in that shape I think there is no question of their reliability.

I beg you will accept the assurance of my highest esteem for your house.

Respectfully,

GEO. W. MILES.

THE THERAPEUTIC GAZETTE.

We invite attention to the coupon advertisement appearing on one of the advertising pages of this issue. The *Therapeutic Gazette* is edited by Dr. Hobart A. Hare, Professor of Therapeutics in the Jefferson Medical College at Philadelphia, and Dr. Edward Martin, Professor of Genito-Urinary Diseases, University of Pennsylvania. Each number contains a wealth of short, practical and useful articles. Seventy-two pages of terse matter, admirably printed, are furnished monthly for two dollars a year.

COD-LIVER OIL ALKALOIDS.

An Associated Press dispatch from Victoria, British Columbia, under date of February 19, says:

William Good's family breakfasted on cod-fish from which the liver had not been removed. Three of the sufferers were brought very close to death, but all are now on the road to recovery. This is the first case of cod-liver oil poisoning on record here.

Between the lines of this dispatch we may read some very significant comment on the medicinal value of the decomposition products —the putrefactive or cadaveric "alkaloids"— which are now offered as representing "the active principles of the oil" in the form of a wine. Does not the incident remind the reader of Professor Wilcox's contention: "These symptoms are the symptoms of ptomaine poisoning"?

Furthermore, a goodly portion of the cod-liver oil on the market is expressed from putrid or semi-putrid livers. If the oil is to exert a curative action, it must perforce be prepared from fresh livers on the very scene of the fisheries.

SOME ADVANTAGES OF EMPTY GELATIN CAPSULES.

Dissolution on contact with the surface of the stomach, and therefore immediate assimilation of the medicament administered.

The medicament may be administered in its most assimilable form (loose powder), and its nauseous taste still disguised.

Quick returns may be expected from emetics administered in empty capsules.

An eminent physician directs attention to the fact that even fluids may be administered at the bedside of the patient, by dropping the liquid into a capsule with the aid of a pipette and having the patient swallow it at once, before the fluid has had time to dissolve the gelatin. The same doctor secures the best effects from cascara sagrada by directing the patient to procure a box of capsules and a pipette and thus administer the bitter fluid extract, at periods prescribed by him.

Cactus Grandiflorus.—In the Philadelphia *Polyclinic*, Dr. Charles Herwisch recommends fluid extract cactus grandiflorus (P., D. & Co.'s) in doses of from five to ten drops three times a day, as a heart stimulant and substitute for digitalis. He says it does not prolong diastole as does the latter, and on this account is of value in diastolic murmurs. It is also valuable in functional disorders of the heart connected with neurasthenia, anæmia, exophthalmic goitre, tobacco heart, etc.

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MALICE.

As oft remarked, a conspicuous success in the pharmaceutical world makes of any house an inviting target for the venomous attacks of certain rivals. A striking instance at the present time is the action of a small concern in Philadelphia — H. K. Mulford & Co.,—who, actuated by a desire to injure us and to advertise themselves, are circulating a slip, bearing on one side a lot of doggerel evidently intended to ridicule the virtues of Nuclein, and, on the other, a letter from Dr. Jacobi, of New York, respecting Thyroid Extract. Both verse and letter are borrowed from the columns of the *Pharmaceutical Era*, a trade journal in which we do not advertise and which accordingly devotes a certain space in each issue to vilifying our house.

So much for the motives of those who are circulating this slip. Now a word as to the letter published by Dr. Jacobi in the *New York Medical Journal* of January 5. We quote it verbatim:

NEW YORK, January 1, '95.

To the Editor of the New York Medical Journal.

SIR: On December 24 the New York representative of Parke, Davis & Co. wrote me a letter, the important part of which is contained in the following lines of information and warning:

"I have recently heard of the complaint made by yourself against the extract of thyroids. My house has written me that they very much regret your action in having sent this product to some of your friends in Europe, since they have never made any claims for it, in fact believe it to be perfectly worthless. However, there has been a certain demand for it, and they have been obliged to put it on the market. The product, you know, was made after the Hammond process, and the demand made by the great advertising given to it by the company handling the Hammond product. Now that my people know that it is not only worthless, but subject to putrefactive changes, they have ceased to manufacture it."

The letter from which this literal extract is herewith given was no reply to any of mine, nor does it claim to be confidential. It is full of interest and very suggestive.

A. JACOBI, M.D

Dr. Jacobi's letter does us a gross injustice in two respects:

1. The resident New York representative of Parke, Davis & Co. did *not* write to Dr. Jacobi the letter quoted by him: the author of that letter was simply a canvasser who never received any such information as he attempted to convey, and was never authorized to make any such statement.

2. What we did write our canvasser in New York was as follows: That the *Extract* of Thyroid (*not the Desiccated Thyroids*—mark the distinction) was sent out by us under protest and warning; that the Extract was made originally in accordance with Dr. Hammond's formula and in response to demands made upon us; that we did not credit this Extract with any more efficacy than that to be derived from a mixture of glycerin, alcohol, and a little boric acid, while on the other hand it might be objectionable owing to the presence of animal matter; hence we were refusing orders for the Extract. We concluded with a request that he explain matters to Dr. Jacobi. Instead of obeying our instructions, the canvasser in question wrote the absurd, mistaken, and blundering letter from which Dr. Jacobi quoted.

But in the meantime Dr. Jacobi has been fully informed of the truth. He knows *all* the facts connected with our manufacture of Thyroid Extract. Were he a fair-minded man he would have promptly made the *amende honorable* by a public correction. He must realize that a house of such magnitude as our own has too much at stake to dare such an imposition as his letter hints at.

Inasmuch, however, as he has not taken the trouble to correct the injustice, our readers can draw their own conclusions as to his notions of fair play.

We have not now, and never have had, any interest in the marketing of Thyroid Extract. The small quantities sold by us were furnished as an accommodation to our friends and patrons. We never recommended the product for administration, and indeed repeatedly expressed without reserve our opinion of its worthlessness. The insinuation that we sought to exploit a worthless product, we repel with the utmost contempt.

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Practical Therapeutics.

THE COD-LIVER OIL QUESTION.

BY EDGAR F. BILLINGS, M.D.

Among the many disputed questions of therapeutics, few attract more attention than that of the relative value of the different preparations of cod-liver oil. Unquestionably, cod-liver oil enjoys an enviable and unsurpassed reputation in the treatment of wasting diseases, and this is wholly merited. The question is not as to value and reliability, but as to how it may best be exhibited.

In what does the value of the oil consist? Of course, almost its whole bulk is made up of the fatty matters which give its characteristic appearance. Combined with these, there are minute quantities of iodine, bromine, and phosphorus, and certain alkaloids and bile salts of very complex chemical nature. Experiment in French and German laboratories has proved that these alkaloids and salts, when extracted from the oil, exert a marked effect upon the system, chiefly diuretic and stimulant. From this it is inferred by some that the beneficial effect of cod-liver oil comes entirely from these extractive principles, and, as a result of this theory, some pharmaceutical manufacturers have put into the hands of the physicians so-called "cod-liver oil" preparations, which contain no cod-liver oil whatever, but instead a minute quantity of these extractives. Now, do these preparations contain "all the active medicinal constituents of cod-liver oil," as their proprietors claim; and is it advisable for the physician to give up cod-liver oil and to prescribe these extractive preparations?

As every physician knows from experience, the most apparent results of the exhibition of the oil are enrichment of the blood and a very rapid increase of fat. But, as has been stated above, the effect of these extractive principles of the oil is almost entirely *diuretic and stimulant!* Will this alone account for the effect produced upon the system? *It seems to the writer that it will not.*

Some forms of neuralgia, which resist the ordinary remedies, will succumb to the plentiful assimilation of fats, and in such cases cod-liver oil gives better results than any other oil; *this fact certainly points to the conclusion that the fat plays an important part in the effect of the oil upon the system. Some authorities, as Dr. Brunton, of the Royal College, look upon the oil as a food rather than as a medicine. Dr. Brunton says: "Its therapeutical use depends on two properties—its ready absorption and its ready assimilation."*

The experiment of taking two loops of the intestine, filling one with ordinary oil and the other with cod-liver oil, and then replacing them, proves that cod-liver oil is absorbed much more readily than ordinary oil. Further, experiment has shown that the oil is found in minute globules outside of the intestine after its administration. This, also, seems to point with no uncertain finger to the importance of the fats. Consequently, in considering the therapeutics of cod-liver oil, we must look upon the oil itself as an essential factor, and the iodine, phosphorus and alkaloidal principles as only in part accounting for its beneficial effect. This conclusion makes it impossible for us to admit the claim that the so-called "cod-liver oil" preparations which contain no oil whatever, but only its ptomaines and other extractive materials, have the same therapeutic value as the genuine oil.—*St. Louis Medical and Surgical Journal.*

Ignatia Amara.—A prominent homœopathic practitioner insists this drug will cause the smoker to lose all taste for tobacco.

PRACTICAL POINTS IN THE TREATMENT OF INTESTINAL WORMS.*

One of the great errors in administering male-fern is the preliminary of a strictly empty stomach. The patient should ingest easily assimilated food the day before treatment, and it is often well to begin with a laxative; it is also desirable that some light food be taken into the stomach on the day the drug is administered, prior to the ingestion of the latter. After a few hours it will be well to follow the No. 44 capsule of male-fern and kamala with a dose of castor oil.

In order to make sure that there is not a

* From the pen of our Medical Adviser; written in response to a request for information as to the proper method of administering our soluble elastic capsules of male-fern and kamala, No. 44.

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second worm, even if this dose prove successful it is always advisable to repeat the remedy under precisely the same circumstances as already laid down, after an interval of one or two days. If neither dose is completely satisfactory, a third should be given after a like interval, on each occasion following up the capsule with a dose of castor oil and perhaps a small amount of turpentine or even four or five minims of chloroform—a few drops of chloroform in castor oil often completes the work begun by the male-fern.

The dose must be guided by the demands of the individual, taking into consideration the physical condition, age, general health, etc. I may add that, although male-fern appears to be more nearly a specific for tapeworm than any other drug, it sometimes fails. Indeed, to remove this parasite is often one of the most difficult undertakings of the physician, and repeated courses of treatment are then found necessary. Sometimes, moreover, after having instituted treatment with male-fern, it will be found advisable to change to some other remedy, such as pomegranate, koosso, pumpkin-seed, etc.

To Render Tablets More Convenient and Palatable.—Do practitioners stop to consider that a bitter tablet, either triturate or compressed, or an uncoated pill, can in an instant be crushed and placed within a gelatin capsule, thereby insuring its more ready solubility and at the same time securing palatability that cannot otherwise be obtained?

SYRUP TRIFOLIUM COMPOUND.

BY JACOB YOUNG, M.D.

Not for many years, if indeed ever in the past, has a compound been placed before the medical profession which has, solely on its merits, won and retained their confidence in such a measure as has the Syrup Trifolium Compound of Parke, Davis & Co.

I have used it extensively for a number of years, and with the greatest satisfaction, in cases requiring an alterative line of treatment, with special reference to those of a syphilitic or scrofulous character. It has a wide range of usefulness in the cutaneous diseases which are so often distressing to the patient and vexatious to the attending physician. Having made a specialty of diseases of the skin for a number of years, I have been able to administer Syrup Trifolium Compound in a great number of cases, and can say that in the wide pathological range from the mildest forms of eczema to the most malignant and defiant affections of the integument it is entitled to the confidence of the medical profession.

Within the past few months I have been attending a severe case of psoriasis. My patient, after using four bottles of the Syrup, with some mild local application to allay the intolerable itching, was entirely freed from her torment, the treatment extending over about eight weeks. I see her at the present time almost daily, and there is not the least evidence of any recurrence.

Another case now under my observation is one of extensive eczema. The only agents employed are Syrup Trifolium Compound and a mild sedative, as well as some antipruritic treatment. The patient has almost recovered, to her and to my extreme satisfaction.

Two cases of syphilis that I have recently treated with the Syrup and the addition of a small amount of bichloride of mercury have progressed most happily; one case having about recovered, and the other satisfactorily improving. To preclude the inference that the last two patients experienced beneficial results merely from the addition of bichloride of mercury, I would add that these are the only two cases in which I made an addition of any agent to the Syrup.

An important consideration with this compound is that it is easily borne by the stomach, being pleasant to the taste, and producing no nausea, even though the doses are frequently given and the treatment protracted. It sometimes acts as a mild cathartic, but in this there is nothing objectionable, indeed in some instances it may be beneficial. Should its action in this respect be unduly prolonged, the Syrup may be discontinued for a few days and then resumed.

I have hesitated to make the above eulogistic remarks, lest I might incur the charge of exaggeration; but after carefully considering my statements I am compelled, in justice to

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Syrup Trifolium Compound and its manufacturers, to state the facts, in the various cases which have come under my notice, precisely as they existed.

SOME THERAPEUTIC EFFECTS OF COD-LIVER OIL.

BY CARL E. CONN, M.D.*

The following studies, made in the Laboratory of Experimental Therapeutics in the State University of Iowa, are respectfully submitted to the profession:

[Dr. Conn here narrates in detail four cases: one of extreme emaciation with marked tendency toward tuberculosis; one of chronic rhinitis; one of anæmia and emaciation with nervous headache; and one of chronic bronchial catarrh. In each case a marked improvement followed the administration of our Improved Lofoten Cod-liver Oil.]

I have also noted that when cod liver oil was substituted for lard oil (as in U. S. P.) in the preparation of unguentum hydrargyri nitratis (citrine ointment) the latter is much more readily absorbed, especially when applied to mucous membrane, as in a case of hordeolum the exit of pus was facilitated by its employment.

An experiment of interest was recently conducted in this laboratory:

After etherization of one of the lower animals an incision was made into the abdomen, and a portion of the small intestine was thoroughly stripped of its contents and ligated in four sections, allowing good (and as near as possible equal) mesenteric circulation, when the following were injected:

1. Improved Lofoten Cod-liver Oil, two drachms.

2. Improved Lofoten Cod-liver Oil, two drachms, mixed with bile one drachm.

3. Castor oil and bile, two drachms and one drachm respectively.

4. Olive oil, two drachms.

In all these cases and experiments Parke, Davis & Co.'s Improved Lofoten Cod-liver Oil was used, and not in a single instance was it found difficult to administer, or to tend in any degree to nausea.

The intestine was replaced and incision sutured, and animal kept perfectly quiet for four and a half hours; then re-anæsthetized and the portion of intestine ligated removed and contents examined, with the following results:

Numbers 1, 2 and 3 were completely absorbed; in number 4 no absorption had taken place.

It will be observed by the foregoing that the bile did not aid in the absorption of oil. —*Medical Age.*

Worth Remembering.—Physicians who dispense their own remedies—and there are few who do not carry a small pocket-case—will find it greatly to their professional advantage to carry a small supply of our gelatin capsules in which to enclose the tablets, powders or pellets they choose to prescribe.

TREATMENT OF THE LIQUOR HABIT BY HYPODERMATIC INJECTIONS OF STRYCHNINE AND ATROPINE.

BY G. W. BATH, M D., OHIO, ILL.

Two years ago I began giving treatment for the liquor habit. I reported eight cases to this journal in the fall of '92. It is with a view of answering inquiries since received, as well as of making a final report, that I write this paper.

The patients are all residents of this town and vicinity; so I have been able to see them nearly every day since they took treatment.

Concerning the efficacy of the treatment, I have to say that it is a cure so far as the treatment of any disease is a cure. Indeed, I think it just as sure as a surgical operation or the treatment of malaria or syphilis.

Strychnine is the drug on which I rely, and the form commonly used is the tablets of the nitrate, $\frac{1}{40}$ grain. I have always used Parke, Davis & Co.'s preparations, and they are very satisfactory. The strychnine is combined with atropine sulphate in quantities to suit: beginning with an injection of $\frac{1}{40}$ grain of strychnine and from $\frac{1}{200}$ to $\frac{1}{150}$ grain of atropine; using the injections from two to four times per diem, according as the patient

* Demonstrator of Experimental Therapeutics, State University, Iowa.

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requires; and increasing the strychnine during the first week, until by the beginning of the second week the patient receives from $\frac{1}{8}$ to $\frac{1}{4}$ grain each day.

The atropine is likewise increased to its full physiological extent, producing the dryness of the mouth and fauces and blurred vision. It is well to bear in mind that strychnine can be tolerated to a remarkable degree, as reports on the treatment of asthma and various neuroses show. At the end of the second week the doses must be decreased until the end is reached with about what was originally given.

After two to four days, if the patient is drinking, his desire for liquor will cease. Drinks and food will taste bad. This is undoubtedly due to the fact that the secretions are charged with the drugs: some nausea will likely be experienced, even to the extent of vomiting, especially if the patient persists in drinking. The atropine is liable to cause nausea when given freely. Yet, contrary to some authorities, I think the strychnine capable sometimes of doing the same.

The injections should be continued over a period of at least three weeks, during which time the patient will have received from forty-five to ninety injections. It is well to give as an aid to the hypodermatic treatment some tonic mixture, as nux vomica, digitalis with tincture of capsicum if necessary; or some of the ordinary bitter tonics might answer, the entire idea of the treatment being to keep the system thoroughly saturated with the drugs, using such agents as best favor reconstruction of nerve-tissue and the elimination of the waste products. I consider atropine an eliminant of considerable virtue. By contracting the arterioles and thus increasing the blood-pressure, the quantity of urine voided is much larger. The tonic action of strychnine upon the unstriped muscular fibre causes increased peristalsis, and copious evacuations of the bowels result—although atropine alone when given for a period causes an increase of the stool.

Concerning the best time to treat the patients: I fancy the results have been more prompt when the patient has been drinking freely. I usually allow the patient to drink until he is tired of it. He generally quits of his own accord. But if one found it necessary, *an injection of the apomorphine could be used, to produce the impression that liquor was no longer borne and would vomit the patient if it were taken.*—Condensed from *St. Louis Clinique.*

SUMMARY OF SUGGESTIONS FOR THE TREATMENT OF MIGRAINE.

BY HUGH HAGAN, M.D., ATLANTA, GA.

The treatment of migraine, with a view of improving the condition, consists of medicamentation, dietetics, hygiene. First of all, any error of refraction, be it never so slight, should be corrected, for modern literature abounds with favorable reports following the use of spherical and prismatic lenses for hypermetropia, exophoria, esophoria, and hyperphoria, respectively. Abnormal conditions of nose, ear, and throat should receive proper attention. Gastric catarrh should be combated by rigid nitrogenous diet, lavage, the alkalies, and bismuth or cerium, nux or other bitters; anæmia, by cold baths, massage, general faradization, full diet, large doses of iron, either the ammonio-citrate in ten-grain doses, the citrate of iron and quinine in doses of ten grains, the tincture of the chloride, ten to fifteen grains, the dialyzed and the albuminate in one-grain doses well diluted in water, the peptonate in three- to five-grain doses, or Blaud's pills. Small doses of the corrosive chloride of mercury added will prove beneficial in sea travel. The mineral acids, especially in cases caused by lithæmia, will most always give satisfactory results, though at times we will find the alkalies do better, and even best of all when given an hour or two after meals.

The drug *par excellence* in the treatment of migraine is *Cannabis indica*, it reaching almost the dignity of a specific.* Without exception the modern writers agree in the great and favorable results of this drug, either in the form of a fluid or solid extract—generally the solid extract in from one-eighth to one-third grain, three times a day for

*We strongly recommend our various extracts of *Cannabis ind.ca* as offering a highly reliable and uniform means of combating migraine. Our normal liquid of this drug is so adjusted by assay as to exclude absolutely any fluctuations of medicinal potency.

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months, with the proper diet and hygiene; this drug is the sheet anchor and hope of the sufferers from migraine, though at times alarming effects are produced by very small doses. I have a patient who possesses an idiosyncrasy so susceptible that one-sixth of a grain of the extract produced such alarming effect that I had to desist in my efforts to administer it. A small dose of one of the bromides at night will add to the efficacy of the cannabis. Mild laxatives or an occasional calomel purge will do much to relieve constipation, engorged liver, and turgid hæmorrhoidal veins. Out-door exercise, long hours of rest, sea voyages, and sojourns in different climates, have all, at times, a happy influence. —*Atlanta Medical and Surgical Journal.*

Palatability and Exact Dosage.—Gelatin capsules afford an almost absolute means of securing relatively exact dosage. The smaller are readily taken by the youngest children, and their advantages in administering quinine and other nauseous drugs cannot be overestimated.

FURTHER REPORTS ON THE ABORTION OF TYPHOID FEVER.*

BY JOHN ELIOT WOODBRIDGE, M.D., YOUNGSTOWN, OHIO.

Nothing save the feeling of responsibility for every life sacrificed to typhoid fever, and the positive knowledge of its correctness, could have forced from me an affirmative answer to the question: Can typhoid fever be aborted? I look back over twelve years' experience without a death from typhoid, malarial, or any continued fever, to a preceding series of sixteen years with a death-rate of 17 per cent. from typhoid fever alone; and from a time when my brother practitioners were having no better results than I formerly had. On July 17, 1893, I gave in my local society the names and residences of twenty-one cases of typhoid fever out of the large number I had treated. June 25, 1893, I instituted a series of clinical charts and began numbering with 20, presenting at your last meeting twenty charts, to show the modification of the temperature curve by treatment.

Since our last meeting I have treated alone or in consultation fifty-four cases of typhoid fever, without a death, and with an average duration of treatment of about twelve days. I had, also, a case of pneumo-typhus and two or three cases sent by other physicians at late stages of the disease, one as late as the sixteenth day. I was called during the year to see one case on the thirty-fourth day of sickness when no treatment was needed, and another at a somewhat earlier period but when the patient was dying of exhaustion and no treatment was possible. In the Section of General Medicine at the San Francisco meeting of the American Medical Association I reported my cases up to and including No. 75.

[Here follows a detailed description of Cases 76 to 96 inclusive, recovery being uniform in all.—ED. NOTES.]

No sane man would dare to go into houses with three or four members of a family sick with typhoid fever, the temperature of some of the patients above 105 degrees, and give my invariable prognosis, unless he knew that there was power in medicine to ward off the threatened danger. No man would dare to make the promises I have made for so many years, unless he knew he could fulfill them. Remember, I have invited the closest scrutiny of my cases, and should I have a death from typhoid fever, or fail to abort a case when seen early, it would be emblazoned all over this broad land. But had I twenty years instead of twenty minutes, and could take you back and show you all the evidences that proved to me that typhoid fever can be aborted; could I show you all the typical cases that have yielded to this intestinal antisepsis· show the awful complications that threatened the life; show the white-haired old lady, with the positive proof of a pre-existing Bright's disease, with her repeated intestinal hæmorrhages; show you the old man of 73 years, whose young son had succumbed to an intestinal hæmorrhage; show the young lady with a year-old ovarian trouble presenting a rounded fluctuating mass through the abdominal walls; show you the wife of

*Read before the Mississippi Valley Medical Association at Hot Springs, Ark., Nov. 21, 1894. Condensed from *Journal of the American Medical Association*, January 5, 1895.

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Angus McPhee with the blood welling up from her lung; and show you, too, that all of these patients recovered, many of them under the most adverse circumstances, totally disregarding all of the things usually insisted upon as essential to recovery, many of them with only such nursing as a young child could give; some giving no attention to restrictions as to diet, and all allowed to use their own pleasure as to exercise and bathing, and yet with no death to mar the record, - you would commend my course in making so great a sacrifice and even endangering my professional career in the interest of humanity.

In the abortive treatment of typhoid fever, an early diagnosis is of the first importance. Every case of typhoid fever should be put upon proper treatment the first time seen. There should be absolutely no exception to this rule. If you await the development of pathognomonic symptoms of typhoid fever before beginning treatment, you will not always succeed in aborting the disease. Therefore a diagnosis from any other disease to typhoid fever is wholly unjustifiable, but the reverse is always proper, because the best possible treatment for typhoid fever is also a safe initial treatment for any disease for which it could be mistaken.

It must not be supposed that because I have begun treatment at almost every stage of typhoid fever, and have treated so large a number of cases, and have had no death from typhoid fever or any disease that could be mistaken for it, for more than twelve years, that such results are always possible. These cases make the proof positive that typhoid fever can be aborted, but it does not follow that it can always be aborted, or even that every life can be saved when it has not been properly treated in its earliest stages.

Next in importance to an early diagnosis, if indeed it should not stand *first*, is, that your prescriptions be properly compounded of pure and active ingredients. Messrs. Parke & Davis have for years supplied most of the materials entering into my prescriptions, and latterly they have put up for me tablets of formulas Nos. 1 and 2 and soft capsules of formula No. 3 in a most satisfactory manner.

Begin the treatment with a tablet of formula No. 1:

℞ Podophyllin, $\frac{1}{100}$ grain.
Hydrarg. chlor. m., $\frac{1}{16}$ grain.
Guaiacol carb., $\frac{1}{16}$ grain.
Menthol, $\frac{1}{16}$ grain.
Eucalyptol, q. s.

Sig.: Every fifteen minutes.

No laxative effect should be produced during the first twenty-four hours, the object being to secure the antiseptic before the eliminative effect of the remedy. During the second period of twenty-four hours, not less than five or six free evacuations of the bowels should be secured. Then formula No. 2:

℞ Podophyllin, $\frac{1}{100}$ grain.
Hydrarg. chlor. m., $\frac{1}{16}$ grain.
Guaiacol carb., $\frac{1}{4}$ grain.
Menthol, $\frac{1}{16}$ grain.
Thymol, $\frac{1}{16}$ grain.
Eucalyptol, q. s.

One or more tablets every hour or two should be given with No. 1, as frequently and in as large doses as possible without producing too much laxative effect, and as long as necessary if no symptoms of ptyalism (a wholly unnecessary complication) appear, in which event they must be discontinued promptly for a day or two, and if necessary chlorate of soda or potash given, returning as soon as possible to formulas Nos. 1 and 2. The object is to give these remedies as freely as possible at first, and then so gradually reduce the size and frequency of the doses as to allow the movements of the bowels to become less and less frequent, until, as the temperature approaches normal, the movements shall be reduced to one or two each day.

About the fourth or fifth day of treatment begin No. 3 every three hours:

℞ Guaiacol carb., 3 grains.
Thymol, 1 grain.
Menthol, ½ grain.
Eucalyptol, 5 minims.

Every dose of medicine should be washed down with large draughts of distilled or sterilized water, or according to indications with some good laxative or diuretic mineral water.

This treatment begun early and intelligently carried out will, if the remedies are pure, active, and properly prepared, abort typhoid fever, and a death from the disease will be unknown.

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A REMEDY FOR MORPHIA SICKNESS.

BY I. W. CHISHOLM, M.D.

There is nothing perhaps that inspires a patient with such gratitude, confidence, and respect for our profession, as when, suffering untold agony, he is, after receiving a hypodermatic injection of morphia, in a few minutes entirely relieved of all pain. He feels as though translated from an abyss of woe, to bask in a land of pure delight. But alas! after the lapse of a few hours the scene changes: his stomach is converted into a pandemonium. Now, if we are enabled to make the closing scene of the drama as delightful as the first, on the subsidence of all pain, we have conferred untold blessings on suffering humanity, and by a reciprocal reflex action on ourselves and the profession. After considerable experience and observation, I find by combining hydrochlorate of cocaine with the sulphate of morphia that no sickness follows the administration of the morphia—at least this has been the result of my experience from the administration of two hundred tablets of the foregoing combination, which I had prepared by Messrs. Parke, Davis & Co. The following formula is entirely adequate in quantity for general purposes, to be increased or diminished owing to the exigencies of the case or idiosyncrasy of our patient:

℞ Morphia sulphate, ⅛ grain.
Cocaine muriate, ⅛ grain.
M. Make tablet j.

I would add that, theoretically, this combination *might* prove valuable as a prophylactic or curative in sea and car sickness—at least it would be deserving of a trial.—*Columbus Medical Journal.*

THE SCIENTIFIC DEPARTMENTS OF OUR DRUG MANUFACTORIES.*

The times have changed in America since the pharmacist was simply the importer, perhaps part owner, of the ship which brought his cargo to our shore. He has now become not only a merchant, but a manufacturer; not only a manufacturer, but a scientific producer, and in the particular realm of science to which he devotes himself he has few superiors in practical chemistry. We might, however, say the same of many other leading industries. Indeed, it is the tendency of the time that directness, simplicity and economy govern all manufacturing establishments. Even the beer-breweries now employ expert chemists who test the various productions, estimate the value of the hops and malt, govern temperatures, and give directions as to the length of time to be occupied by given processes. The chemical laboratories attached to the establishments of manufacturing pharmacists have grown to be very extensive, very complete, and give employment to the highest order of attainment. It is natural, then, that men engaged in such pursuits should seek some outlet through which the world must become familiar with their studies, investigations, and results. . . .

The time has come when the vast stock of chemical and pharmaceutical knowledge stored in these great laboratories must be made available to the American medical profession. . . .

Let us have more scientific productions from the great laboratories of our manufacturing chemists. Let them publish their methods, the scientific experiments which they make, and when they have attained clear and definite results let them be boldly stated. Not only will they gain in the opinion of the medical profession, but it is more than probable that the value of a scientific name will be appreciated by the profession in such a manner as to make it pecuniarily profitable not only to issue ephemerides, but regular working bulletins and monographs. Some of the manufacturing establishments in Europe have been pursuing this course for some time, and we understand that from time to time some of our own manufacturers have published occasional monographs or "working bulletins," * but the systematic output, if

*Condensed from editorial in *Journal of the American Medical Association.*

* The Working Bulletin system was introduced by us many years ago in connection with the investigation of new medicinal agents. Samples of new drugs with full existing information, botanical, medical, and chemical, were first placed by us in the hands of clinical experimenters, and when the success or failure of the drug was reported in articles contributed to the medical press we faithfully collated such reports, whether favorable or adverse to our introductions, into our "Working Bulletins," and then distributed them *gratis* to the profession.

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we might term it, of the scientific investigations conducted under the direction of our leading firms has not, we believe, been at any time regularly or completely carried out.

This result, we trust, will shortly be accomplished, and it is probable that with its accomplishment there will come the end of that series of products classed under the name of "secret preparations," which have in the past given rise to so many controversies and such wide differences of opinion.

Rectal Medication.—No more convenient method of administering a rectal suppository can be had than by enclosing the medicament in a gelatin capsule. It is cleanly, safe, and certain in effect. By moistening the capsule externally its introduction is rendered painless and its speedy solution secured.

TREATMENT OF TOBACCO POISONING.

BY JAMES K. CROOK, A.M., M.D.*

The treatment of tobacco toxæmia in recent cases is very simple, a withdrawal of the cause generally resulting in a speedy disappearance of the symptoms. There should be no compromising in this matter, however; a complete and rigid abstinence should be invariably insisted upon. In more advanced or severe cases some form of internal medication must supplement the withdrawal of the habit. Any of the nervines, antispasmodics or diffusible stimulants used in functional cardiac disorders due to other causes may be given a trial. The author has obtained good results from the use of nitroglycerin in doses of one minim of the centissimal solution four times a day. This may be gradually increased until three, four or five drops are given at one exhibition. The following formula is often efficacious:

℞ Nitro-glycerin (cent. sol.), 16 minims.
Ext. Cact. grandif., fl. (P., D. & Co.), 2 drs.
Spts. ætheris comp., to 1 ounce.

M. Sig.: 30 drops in water four times a day. To be gradually increased to 60 drops if required.

Cases will frequently be found, however, in which the nervous mechanism of the heart has become so profoundly impressed by the poison that months and even years must elapse before a complete disappearance of the symptoms will occur. There is good reason to believe that organic nervous changes have taken place in these cases. — *Post-Graduate.*

* Instructor in Clinical Medicine, New York Post-Graduate School and Hospital.

MANAGEMENT OF FISTULA IN ANO, WITHOUT OPERATION.

BY GEORGE H. GOODYEAR, M.D.

Mrs. G. J——, aged 24, mother of two children, consulted me September 2, 1892. Had been troubled with constipation ever since she could remember, and so persistent that a natural movement of the bowels seldom occurred. She also informed me that she had suffered from fistula for eleven years, and had recently been advised to submit to an operation, which she refused. This fistula was more troublesome whenever the constipation was neglected.

Upon examination the following condition was found: A fistulous opening to the right side of anal margin, about one inch, and at about one inch depth divided into two branches, one being apparently blind, and the other entering the rectum at a distance of one and one-half to two inches.

A short time previous to this I had noticed the report of a case of fistula-in-ano relieved by injections of a strong solution of potassium permanganate, followed by the introduction (upon a grooved director) of an iodoform ointment, and repeated every two or three days.

As this was a case where operation was refused, I determined to try similar treatment, and accordingly ordered for the constipation:

℞ Ext. cascara sagrada, fld. (P., D. & Co.), 7½ drachms.
Ext. belladonna, fld., ½ scruple.
Ext. nux vomica, 1 drachm.
Simple elixir, to make 3 ounces.

Half a teaspoonful in wineglass of water after each meal, gradually reducing the dose.

This proved all that was required for the relief of the constipation.

I then injected into the fistulous tract, by means of an ordinary glass syringe, the following:

℞ Permanganate of potash, ½ drachm.
Distilled water, 1 ounce.

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I then introduced the iodoform ointment —one drachm to the ounce—upon a grooved director, penetrating as deeply as possible, and at the same time gently twirling the instrument between my thumb and finger.

I repeated permanganate injections and application of iodoform ointment every two or three days for a period of two weeks, and then gradually lengthened the period between sittings, until finally the opening closed. This was more than two years ago, and the cure is complete, the fistula never having reopened. It had frequently closed for a day or so, before, and then again opened with an increased discharge.

Now, the query is this: How much is due, in this case, to the relief of the constipation; and how much to the method of treatment as just outlined? If fistulæ can be cured, even in a small proportion of cases, by such a simple procedure, it seems that the profession should know of it; and such is the object in reporting this case. I hope that others will try it when opportunity presents and report success or failure.—*Medical Age.*

CULTURE MEDIA (STERILIZED) FOR PURE CULTURES OF BACTERIA.

Physicians often feel the need of a bacteriological study of their cases. A culture tube and microscopical examination will often in a few hours confirm a doubtful diagnosis, make clear an obscure case, decide for or against isolation and disinfection, etc.

A large majority of physicians, however, do not have the necessary apparatus for preparing culture media, or having it they may lack the time or necessary skill. It requires several days to prepare the ordinary culture tubes for the work.

To accommodate the profession we have decided to supply such culture media as they may need, from our Bacteriological Department. The following sterilized culture media will be furnished in glass tubes containing from five to eight cubic centimeters each.

GELATIN.

No. 1. Nutrient Gelatin.
No. 2. Glucose Gelatin.
No. 3. Litmus Gelatin.

AGAR.

No. 4. Nutrient Agar.
No. 5. Glycerin Agar.
No. 6. Glucose Agar.

In mailing-cases, each containing three tubes of any kind, Nos. 1 to 6.

BLOOD-SERUM.

No. 7. Blood-Serum, according to Dr. Koch.
No. 8. Blood-Serum, Loeffler's mixture for diphtheria.

EMPTY TUBES.

No. 9. Empty Test Tubes, sterilized, plugged with cotton, and rubber-capped.

Blood-Serum No. 7 will be supplied in mailing-cases of three tubes, like Nos. 1 to 6.

Loeffler's Blood-Serum mixture, No. 8, will be supplied in mailing cases containing one tube of the blood-serum and a second tube containing a sterilized swab.

The various kinds of gelatin and agar culture media, also bouillon, will also be supplied in bulk in ½-liter flasks, to enable physicians to refill the tubes.

In addition to the above, any special medium that may be required will be supplied on order, in quantities of not less than 100 tubes, in as short a time as possible after receipt of the order.

Tubes No. 9 will be found convenient for collecting samples of pus, blood, exudates, etc. Until the rubber caps are removed they are practically hermetically sealed and will remain sterile indefinitely.

PRICES.

Per case containing three tubes (any culture medium from No. 1 to No. 6)	$0.40
Per case containing three tubes No. 7	.90
Per case containing two tubes (viz.: one tube with sterilized swab; one tube with culture medium No. 8)	.50
Per case containing three empty sterilized tubes, No. 9	.30

Specify distinctly by number the kind of medium required in each case, and order number of boxes and not number of tubes.

We shall aim to ship the culture media in as short a time as possible after receipt of the order. As all forms of culture media deteriorate with age, and as we intend to furnish them as freshly prepared as possible, with the more or less uncertain demand, we cannot always promise to make shipment on the day on which the order is received.

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THE GLYCERIN SUPPOSITORY AS A SUBSTITUTE FOR THE GLYCERIN TAMPON.

Dr. J. T. Graham, in a paper read before the Virginia Medical Society, October, 1894, speaks of the general use of the glycerin tampon. The only way in which glycerin relieves congestion of the uterus and its adnexa is by depleting the engorged vessels of these organs by means of the process of osmosis, on account of the great affinity glycerin has for water. Reasoning from this fact he concluded that glycerin in the solid state would have a greater effect upon the inflamed parts to which it might be applied, because it would take up a greater amount of serum, and the effect would be more prolonged on account of the gradual dissolving of the glycerin. He therefore introduced into the vagina, close up to the cervix, an ordinary rectal glycerin suppository, and held it in place by a pledget of wool. The effect was much superior to that of the glycerin applied with the tampon. He also had glycerin suppositories made containing one or two grains each of alum and thymol. The advantages of the glycerin suppository may be stated as follows:

1. Easy application, as it does not require the use of the speculum.

2. Its greater and more prolonged effect, its action extending at least over a period of thirty-six hours.

3. It can be used in the treatment of the virgin without the use of the speculum and will remain in place without the pledget of wool; or if it seem best the patient can be taught to apply it herself.—*Medical Review.*

A NEW LUBRICANT FOR GYNÆCOLOGICAL USE.*

The need of a suitable lubricant for use in gynæcological practice has long been patent to all who have undertaken to do aseptic work, to reduce the danger of carrying infection from one patient to another, to the minimum. Olive oil, cocoanut oil, vaselin plain and carbolized, and various other unguents, are recommended by various authorities, and are in quite general use, but all of these substances are open to the great objection that they are more or less difficult to remove from the hands, and retain not only the foul odors derived from malignant and malodorous cases which are frequently encountered, but also the microbes of various sorts which are derived not only from the sources referred to but which are likely to be encountered in any case.

Through the kindness of Dr. E. C. Dudley, of Chicago, we have recently had placed in our hands a specimen of a new lubricant which he has perfected, after many years of experimentation, the basis of which is glycerin. The lubricant contains glycerin, gum tragacanth, boracic acid, starch, and volatile disinfectants, and serves the purpose of a lubricant as perfectly as can be desired. When the hands are well covered with this lubricant, the skin seems to be protected from the absorption of the ill-smelling soluble substances which are encountered in vaginal and rectal examinations, so that when the glycerin is washed off, the fœtid substances and other impurities are washed off with it, and one does not need to spend an hour or two at the washbowl scrubbing his hands with strong soap and a nail-brush after the examination of a case of rectal cancer, to get rid of the horrible odors of skatol and decomposing flesh.

The composition of the unguent is such that it is readily soluble in water, so that the hands can be thoroughly cleansed almost in an instant by simply holding them in a stream of water, without using soap and nail-brush.

Another advantage possessed by this incomparable lubricant is the fact that if any tendency to chapping of the skin exists, it is readily cured by the thorough cleansing which is effected, and by the healing properties of glycerin.

The writer has adopted the unguent also as an aid to asepsis in the routine preparation for work in the operating-room. Soap is no longer necessary for this; and with the disuse of soap, and a more perfect cleansing of the hands, there is less left to be removed by ether or alcohol, and less to be killed by the disinfectants, so that the asepsis is rendered more complete.

This excellent preparation is manufactured by Parke, Davis & Co., under the name of Glycerin Emollient.

The thanks of the profession are certainly due to Dr. Dudley for his painstaking effort

* Editorial in *Modern Medicine.*

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to discover an ideal lubricant, and he is to be congratulated that his efforts have been attended by complete success.

LACTOPHENIN AS AN ANODYNE AND ANALGESIC.

BY J. P. COWLES, M.D.

In the early years of practice I entertained a strong prejudice against opiates, especially morphine, which I have not entirely lost. Not that I could or would undervalue the great service it has rendered to sick and suffering humanity, but the discomforts and evils which too often follow caused me to search for an agent which, possessing all the good qualities of opium, would at the same time not induce the unpleasant results that accrue to the latter. Latterly my attention was called to phenacetin, of which I used at least my quota, and, while in many cases it has proved satisfactory, it is too slow of action, the suffering patient waiting thirty minutes to two hours before obtaining relief; and some cases are entirely unaffected by its use.

More recently attention was called to lactophenin. While my experience with this medicament has not been so extensive as with other antipyretics, I can assert with positiveness that so far, both upon myself and others, it has not disappointed me in a single instance; it relieves and sustains the system under disease, with no unpleasant after effects.

In administering lactophenin I direct that the dry powder be placed upon the tongue and followed by about a tablespoonful of hot water or tea; then to agitate in the mouth a moment, before swallowing. In this manner the powder is nearly or quite all dissolved before passing into the stomach.

Its action has been a soothing, quieting relief after one or more doses have been taken, according to the severity of the case. To me it appears to be the ideal anodyne and analgesic.

From all I can gather concerning it, aside from its chemical relations, I am inclined to attribute its prompt and certain action to its ready solubility.

Lactophenin has a fine prospect for the future, and must in my opinion stand at the head of this class of medicinal remedial agents.—*Medical Age.*

SOME NEW REMEDIES.

BY W. C. MANLEY, M.D., FRANKLIN, ILL.

Those remedies to which I am glad to call attention are preparations with which I have been experimenting for one or two years and which I am now using in certain affections after satisfying myself that they are safe and reliable.

The first remedy among the comparatively recent productions to which I shall ask your attention is Chekan, or *Eugenia Chequen.* This plant is a native of South America, where it grows in abundance. It has been introduced as a remedy in chronic catarrhal inflammation of the respiratory mucous lining.

A fluid extract of the drug has been prepared by Parke, Davis & Co., Detroit, Mich., from whom samples may be obtained by those wishing to give it a trial.

Dr. William Murrell, of London, highly recommends it in the winter coughs, and it is in these cases, especially in aged people, where I have given it the most thorough trial, and in *chronic* cases it has given the best satisfaction.

It has been my privilege during the past winter to use the drug in several cases, in persons ranging in age from sixty to eighty years. It seems to be particularly adapted to those conditions following an acute inflammation of the air-passages, which take on the character and symptoms (except the elevation of the temperature) of phthisis pulmonalis in younger subjects. I usually prescribe the fluid extract in half-drachm doses, from four to eight times a day, in a little simple syrup or the fluid extract of liquorice (which quite completely disguises its objectionable taste and at the same time acts favorably upon the inflamed mucous surfaces). It is especially beneficial in purulent bronchitis, and I have found it to act nicely in all chronic coughs, particularly when the bronchial passages *only* are involved. I would not use it in phthisis pulmonalis.

The literature, pertaining to the parts used, its preparation, size of dose, and applicability, will be furnished any physician by Parke, Davis & Co.

The next remedy on the list which has claimed my attention during the past winter is Cocillana. It was brought to the notice

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of the profession in this country by Dr. H. H. Rusby.

I have used it in a number of cases of subacute bronchitis and in the persistent coughs following an attack of influenza, pneumonia, and measles.

The therapeutical action of cocillana is similar to that of chekan upon the respiratory apparatus, but its effects are more satisfactory in the subacute conditions than when the case is chronic.

The action of cocillana upon the respiratory apparatus is similar to that of fluid extract jaborandi when given in ten- or fifteen-drop doses, and similar to fluid extract gelsemium when given in smaller doses.

I have been well pleased with its action in spasmodic affections of the air-passages, such as asthma, hay-fever, etc. I consider it an excellent remedy in the declining stage of pneumonia. It seems to accelerate resolution and certainly relieves the lingering cough.

Cocillana, when given in moderately large doses—twenty to thirty drops—seems to act directly or specifically upon the broncho-pulmonary mucous membranes.

While there is usually a reduction of the temperature, I do not class this remedy with the antipyretics.

Without going into a detailed account of clinical cases, I will say that the effects and results have been very similar in all cases of pulmonary affections, and with my experience I can heartily indorse the drug as one of the best acquisitions to our materia medica.

The fluid extract of Pichi is a comparatively new remedy with which I have been experimenting during the past winter. It is indicated in all affections of the urinary organs. I have found it especially useful in catarrhal troubles of the bladder and urethra.

I have used it with decided satisfaction in several cases of gonorrhœa where the injections had been forced too far back, carrying the disease into the bladder, thus causing painful and frequent micturition. Pichi is a useful tonic to a weak bladder or where mucous membranes require tonicity. In irritable conditions of the bladder and urethra of pregnant women it will be found a useful and satisfactory remedy.—*Chicago Medical Times.*

JAMBUL IN DIABETES.

BY J. D. HUGHES, M.D.*

I have had no result at all with the powdered preparations of jambul in diabetes, and in fact gave up the use of the drug altogether until Messrs. Parke, Davis & Co. put their fluid extract on the market, and this I have given, more or less, to all my patients suffering from diabetes, with excellent results.

While I do not claim jambul to be a specific, I do believe the fluid extract of the seeds is the best and most reliable agent known for the purpose of arresting the diabetic process. It has been my custom to give it in five-minim doses four times a day for a couple of weeks; three-minim doses for the next two weeks; then to gradually run it up to ten minims for the succeeding fortnight; then gradually reducing so as to come to a full stop at the end of the sixth week. Meantime I note carefully day by day the specific gravity and other conditions of the urine. If sugar reappears, the drug is resorted to again and pushed until this pathological feature is eliminated.

While jambul may not permanently relieve diabetes, it certainly takes away the excessive nervous symptoms, the feeling of uneasiness, and allows the patient to go about his daily labor with ease and comfort, to say nothing of being able to sit at the table and eat moderately of what is preferred—in fact, the patient once more feels like a human being and not like an animal condemned to bran-mashes and other tasteless and unsatisfactory messes.

Cascara Sagrada in Hæmorrhoids.—Mr. T——, aged 50 years, a farmer, had suffered with piles for thirty years, and had used many remedies, all to no purpose. I gave him a four-ounce bottle of fluid extract cascara sagrada, one teaspoonful to be taken every evening on going to bed. He assured me that this entirely relieved him—in fact he has several times spoken of this. Now, after a lapse of more than two years, there is no sign of his hæmorrhoidal trouble, nor has there at any time been any relapse. I find the cascara among the best remedies to relieve chronic constipation. It acts well as a bitter tonic and stomachic also.—DR. J. P. SHAFER, in *Louisville Medical Monthly.*

* Before the New Haven County (Conn.) Medical Association.

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Gleanings.

Migraine.—Ten drops of fluid extract saw palmetto has aborted many cases of migraine.

Asthma.—There is perhaps no one remedy which is so efficient in all cases of asthma, regardless of their source, as sodium iodide.

Our Hypodermic Tablets are marketed in 100's and 25's. Be sure to specify the number per bottle when ordering through the drug trade.

Lippia Mexicana.—This drug is almost a specific in the hoarse, barking winter cough without secretion, so common in northern climates.—*Medical Age.*

Arbor Vitæ.—Twenty drops of the tincture of *Thuja occidentalis* given during the day is a valuable adjunct in the treatment of cancer.—*Semaine Médicale.*

Uterine Inertia.—Give normal liquid ergot. Put a drachm in fifteen teaspoonfuls of water, and beginning early give a teaspoonful every ten or fifteen minutes.

Chloral and Chronic Alcoholism.—It is worth remembering that chloral is apt to prove a dangerous drug when any considerable amount is administered to habitual drunkards.

A Vehicle for Iron Salts.—

℞ Cit. iron and quinine, 2 drachms.
Cascara Cordial (P., D. & Co.), 1½ ounces.
Water, 1½ ounces.

—Dr. Charles Haddock.

Cocillana in Bronchitis.—It is said that from five to twenty-five minims of the fluid extract of cocillana given in chronic bronchitis secures expectorant effects without depression, and at the same time helps to improve the appetite.—*Southern Clinic.*

Palmer's Anti-Constipation Pill (P., D. & Co.).—

℞ Purified aloes, 1 grain.
Ext. henbane (P., D. & Co.), 1 grain.
Ext. nux vomica (P., D. & Co.), ½ grain.
Powd. ipecac, $\frac{1}{10}$ grain.

For one pill.

Ergot for Enlarged Tonsils.—Five or ten minims of normal liquid ergot, injected into a hypertrophied tonsil, does away with the necessity of employing the tonsillotome—causes the enlargement to recede.—Dr. James Castle, Lynn, Mass., in *Medical Age.*

In Acute Bronchitis.—

℞ Vini ipecacuanhæ (P., D. & Co.), 2 drachms.
Liq. potassii citratis, 4 ounces.
Tr. opii camphoratæ (P., D. & Co.), 1 ounce.
Syr. acaciæ, 1 ounce.

M. Sig.: A tablespoonful thrice daily in first stage of ordinary acute bronchitis.

G. M. Phillips, Ph.G., M.D., Professor of Genito-Urinary and Military Surgery, Barnes' Medical College, St. Louis, reports: "I am now using Ferratin with six late syphilitic subjects, well calculated to try the virtues of any tonic. In the future this salt will have a place in my esteem."

Chronic Cough and Chronic Bronchitis.—

℞ Dilute hydrocyanic acid, 24 minims.
Spirits of chloroform, 2 drachms.
Dilute hydrobromic acid, 3 drachms.
Tincture squill, 45 minims.
Syrup Hematic Hypophosphites (P., D. & Co.), to make 3 ounces.

A dessertspoonful every three hours.

Arbutin as a Diuretic.—This glucoside, which is derived from pipsissewa, wintergreen, uva ursi, trailing arbutus, etc., is a white crystallizable substance of slightly bitter taste, freely soluble in water. It is a diuretic soothing to the entire urinary tract. It is especially useful in the very common form of irritable bladder evidenced by constant desire for micturition, great straining with severe pain and the passing of only a few drops of scalding urine. Given in doses of $\frac{1}{67}$ grain every fifteen minutes, it acts like magic, entirely relieving the symptoms in a short time and producing a flow of perfectly bland urine. No other remedy has ever given me such excellent results as a diuretic, and the more I study its action the better I like it.—W. L. Johnson, in *Alkaloidal Clinic.*

For Cachexia or Anæmia with Impending Pulmonary Trouble.—

℞ Syr. Trifolium Comp. (P., D. & Co.), fl. ℥ iij.
Syr. Hematic Hypophos. (P., D. & Co.), fl. ℥ iij.

M. Sig.: Two teaspoonfuls after each meal.

Professor Fennel, the expert chemical adviser and coadjutor of Ohio Food Commissioner McNeal, is up to his ears in the work of analyzing suspected foods and medicines. In discussing with a representative of the *New York Times* his recent analysés of various preparations of coca, the Professor stated:

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"I took American authorities as my standard. Parke, Davis & Co., of Detroit, were the first manufacturers of cocaine in this country. Cocaine is obtained from coca-leaves. The firm sent Dr. H. H. Rusby, now Professor of Materia Medica in the New York College of Pharmacy, to Peru and Bolivia. He remained there for nineteen months collecting all manner of facts about the plant, its growth, its methods of cultivation, and the habits of the people of the region. These facts were afterward placed before the scientific world."

Chronic Cough with Profuse Expectoration.—

℞ Fl. ext. yerba santa (P., D. & Co.), ʒ iv.
Fl. ext. Pinus canadensis (P., D. & Co.), ʒ iv.
Glycerin or simple syrup, ʒ iij.

M. Sig.: Teaspoonful every three or four hours.

Tablet Triturates.—Tablet triturates are certainly "convenient and elegant," but, as prepared, I think they are at times far from being "safe and accurate."

I have carefully examined samples from several different manufacturers in various States and find the same objection to all, namely, that the ingredients are not triturated but simply mixed. This might do very well where the medicines are of a harmless nature, although by no means commendable, but when tablets containing arsenic, strychnine and the like are so carelessly made that you can dig out the various combinations with a sharp-pointed knife under the naked eye, I think it is time to cry halt.

In my humble opinion all mixtures ought to be ground and triturated so that the finished tablet should exhibit one uniform color throughout the whole, and the individual drugs should not be distinguishable even under a moderate magnifying glass. Only such can be safe.—"A COUNTRY DOCTOR," in the *Medical Record.*

For Cholera Infantum.—

℞ Bismuth subnit., 1½ drachms.
Euthymol (P., D. & Co.), ½ ounce.
Glycerin, 2 drachms.
Chalk mixture, to make 2 ounces.

M. Sig.: Teaspoonful every three or four hours.

Many physicians are interested in breeding fine dogs, and may profit by the following unsolicited communication received from a prominent importer and breeder in New Jersey:

"Last year I had several fox terrier puppies—of which I am a breeder and importer—very bad and weakly from the after-effects of worms. At a neighboring drug store by chance I discovered 'Weld's Syrup of Iron Chloride.' I brought it home with me and diluted it eight times, giving my puppies a teaspoonful twice a day. As if by magic, they at once grew strong. Their bones developed, coats grew, and they became, from weakly miserable pups, good strong dogs with lots of bone and muscle.

"I have since tried it on larger breeds of dogs with the same good effects. Anybody who in this country is raising large-sized dogs, such as Mastiffs, St. Bernards, Collies, Great Danes, or Greyhounds, should never be without a case of it in their kennels. I know I have to thank you for placing on the market such a splendid tonic for young growing dogs, and shall never be without it in my kennels."

In Ovarian Neuralgia and Dysmenorrhœa where opiates cannot be tolerated, the following will be found useful:

℞ Ext. belladonnæ (P., D. & Co.), ¼ grain.
Ext. stramonii (P., D. & Co.), ¼ grain.
Ext. hyoscyami (P., D. & Co.), ¼ grain.
Quininæ sulphatis, ¼ grain.

M. et ft. pil. No. 1. Dose, one to two pills.

Glycerin was long used in form of enema to provoke alvine evacuations, but the injection apparatus essential thereto constituted no small disadvantage; hence the many attempts to realize a better method of administration. This has at last been accomplished by embodying in suppositories, which are neat, cleanly, convenient, prompt in action, and devoid of danger.

Whatever may be held to be the rationale of the aperient action of glycerin when introduced into the bowel, the result is unmistakable. Nevertheless its activity depends in great measure upon its purity, and especially upon its freedom from water.

We prepare suppositories that in form and size are adapted to either sex, of any age; each one contains 95 per cent. of *pure anhydrous glycerin.* The form, that of a double cone, is one which experience has shown to be most desirable and effective; thereby introduction is facilitated, being continued by the action of the sphincter muscles once the point is fairly entered. The size not only facilitates employment, but renders the suppository convenient of division when desired to use for infants or children. Each suppository may be cut into two equal parts, or even still further divided at the option of prescriber or patient.

It has been supposed that entire solution of the suppository was essential to activity, but

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this is not true Experience has shown that these cones are capable of laxative effect without material loss of substance. That osmosis takes place, or that there is an exudation of glycerin occurring, can be readily shown by suspending a suppository at the surface of a test tube or tumbler filled with water, and observing the downward flow of the specifically heavier glycerin.

Worth Remembering When Administering Cod-liver Oil.*—For the successful administration of cod-liver oil certain precautions must receive attention and many obstacles be removed. The repugnance to the remedy manifested by patients generally, so familiar to the practitioner, is due largely to its unpleasant taste when administered plain or in many well known combinations, and to its association with the dreaded disease, phthisis. True, pulmonary tuberculosis provides a frequent occasion for its use, but the profession long since recognized a broader field of usefulness for cod-liver oil than this single disease. These objections, however, can usually be readily overcome by closely observing certain precautions. At first the dose should be small, since a limited amount only is absorbed by the body; the unabsorbed portion undergoes decomposition, producing fatty acids and other irritative substances, which cause nausea, vomiting, or possibly diarrhœa. The oil should be strictly pure. Products answering to this requirement should be demanded by the profession, and the law resorted to if necessary to attain this point. No preparation of cod liver oil should be employed unless the physician prescribing and the pharmacist dispensing the same are certain as to the method of its manufacture. Cod-liver oil to be free from impurities, especially the putrefactive alkaloids, should be prepared by expression from fresh cod-livers. This process, the only one which should be permitted, produces a clear, pale oil, entirely free from impurities, and yet containing all essential ingredients. The brown and yellow oils are made by allowing the livers to putrefy in vats exposed to heat, and skimming off the oil as it rises, or by boiling the livers in water to a pultaceous mass and decanting the oil. The latter is but a slight improvement on the former method, and oils prepared after such processes should have no place as remedial agents. Emulsions are uncertain quantities, to say the best of them, and should not, on general principles, be depended upon. If an emulsion is desired, it should be prepared in small quantities from pure oil, and made fresh as needed.

*Excerpt from editorial in *Columbus Medical Journal*, March 5, 1895.

In the "Medical Times" of Philadelphia, F. Lessing, M.D., reports:

"I have had, this summer, two terrific 'bleeders,' and I assure the profession that normal liquid ergot saved my patients, although hot injections were used freely. I cannot recommend normal liquid ergot too highly, as manufactured by Parke, Davis & Co., of Detroit, Mich.; it does not create inflammation or abscess, and can therefore be used with impunity. In the cases mentioned above I did not count drops, but simply filled my syringe, injecting as near to the uterus as possible.

"Again, I may be at liberty to mention the position of those bleeders. I am in the habit of not only elevating the podex well, but also of having the thighs well flexed, so as to give the uterus full play-room for contraction."

R. Humphrey Stevens, M.D., physician to St. Mark's Hospital, Grand Rapids, Mich., declared over ten years ago:*

"When a remedy is introduced to our notice which, from its purity, uniform strength, and prompt action, proves all that is claimed for it, I deem it no more than just to give credit to those manufacturers for placing such a reliable remedy in the hands of the medical profession. A remedy which we hold in high esteem is normal liquid ergot (P., D. & Co.'s). It has proved itself to be of uniform strength and purity. It does not precipitate upon the addition of water—a characteristic which is of material benefit. For hypodermatic use it is unequaled. I have in cases of emergency given normal liquid ergot hypodermatically, full strength, without any unpleasant symptoms at the place of puncture. For hypodermatic use, however, I usually dilute it, as recommended."

Since ergot is an "emergency remedy"—badly wanted when needed at all—we venture to bespeak a fair trial for our Normal Liquid Ergot. We have had during the past ten years such a host of reports attesting in the warmest terms its uniform efficacy, that we have developed almost a blind confidence in the normal liquid; it will never leave the prescriber in the lurch, if ergot be truly indicated.

The more interesting articles in the leading medical journals, dealing with normal liquid ergot (P., D. & Co.), have been condensed by us into a pamphlet, which we shall be pleased to send free on application. Write for sample.

*_Therapeutic Gazette_, 1882, p. 14.

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An Ideal Lubricant for Gynæcological Use.

The need of a suitable lubricant for use in gynæcological practice has long been patent to all who have undertaken to do aseptic work, to reduce to a minimum the danger of carrying infection from one patient to another. GLYCERIN EMOLLIENT contains glycerin, gum tragacanth, boric acid, starch, and volatile disinfectants, and serves the purpose of a lubricant as perfectly as can be desired.

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DIPHTHERIA ANTITOXIN.

A Strictly Reliable Serum Prepared after the Method of Behring and Roux.

We have perfected arrangements for a supply of **DIPHTHERIA ANTITOXIN** prepared under the supervision of **Ira Van Gieson, M.D., and Nelson L. Deming, M.D.,** the well known bacteriological experts of New York City, and issued under their certificate of quality and strength.

This Antitoxin conforms to the conditions of the ordinance of the Board of Health of New York City, is absolutely sterile, and will be supplied in vials of 10 Cc. each.

Three grades of strength will be furnished:

1. A weaker serum, which will contain 600 antitoxin units, for immunizing purposes and for the treatment of mild cases. Issued under **blue label;** price per vial, $1.90, strictly net cash.

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Nuclein Solution Improved

CONTAINING 1 PER CENT. NUCLEINIC ACID FROM YEAST.

Prepared According to the Formula of

VICTOR C. VAUGHAN,

M.D., PH.D.,

Professor of Hygiene in the University of Michigan.

Nuclein is a non-poisonous germicide, found in various vegetable and animal cells, also in blood-serum, the bactericidal properties of which are due to this constituent. It increases the number of white blood-corpuscles and stimulates the activity of those organs whose function it is to protect the body against infectious diseases. It has been used with benefit in indolent ulcers, membranous tonsillitis, streptococcus diphtheria, and in *initial* cases of tuberculosis.

Dose—20 to 80 minims hypodermatically.

WRITE FOR REPRINTS OF PAPERS BY

PROF. VICTOR C. VAUGHAN, M.D., Ph.D., and CHARLES T. McCLINTOCK, M.D., Ph.D.

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CHLOR-ANODYNE

A Combination of Anodynes, Antispasmodics, and Carminatives.

AN EFFICIENT REMEDY IN

COLIC, CHOLERA MORBUS, DIARRHEA, DYSENTERY, CRAMPS, SPASMODIC PAINS,

IN A WORD, THE NUMEROUS BOWEL TROUBLES INSEPARABLE FROM WARM WEATHER.

"Despite the fact that I have long used, and almost daily in my practice, the Gilman chlorodyne, I find in the preparation devised by Parke, Davis & Co., and sold under the name of **Chlor-Anodyne**, a more efficient and elegant combination. I do not hesitate to say that nothing as yet made is quite so satisfactory. The dose is about the same as of the old Collis Brown article, while the action is more certain. The smallness of the dose (**15 to 20 drops**) is an advantage over the Gilman chlorodyne, WHICH MUST BE GIVEN IN DRACHM DOSES AND IS ABOUT EQUALLY EXPENSIVE.—DR. E. P. HURD, in *Therapeutic Gazette.*

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THE WOODBRIDGE ABORTIVE TREATMENT OF TYPHOID FEVER.

If this treatment is begun early, no other medicine will be needed, and if intelligently carried out will rarely if ever fail to abort typhoid fever. —DR. JOHN ELIOT WOODBRIDGE, in *Journal of American Medical Association*. . . . . .

In the space allotted to this advertisement the Treatment cannot be fully explained. Send in COUPON attached and receive by return mail detailed information with reports of cases. . . . . .

CUT THIS OUT.

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GENTLEMEN:—Please send me your monograph upon the **WOODBRIDGE TREATMENT OF TYPHOID FEVER.**

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THERAPEUTIC NOTES.

SECOND YEAR. DETROIT, MICH., JULY, 1895. No. 2

Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department
PARKE, DAVIS & CO.,
Detroit, Mich., U. S. A.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

Editorial.

THE LONDON LANCET ON TAKA-DIASTASE

Readers of the NOTES will find it well worth their while to read attentively the interesting article reprinted on another page from the London *Lancet*, which sets forth the wonderful potency of the Taka-Diastase. In this product we present for the first time in the history of pharmacy, on a practical scale, the starch-digesting ferment or enzyme in isolated and stable form.

Eminent authorities aver that the most important need of our materia medica heretofore has been the possession of a diastatic product in dry form, and that, on practical clinical grounds no less than on cogent therapeutical principles, such a product would offer the most efficacious means of combating amylaceous dyspepsia at the command of therapeutical science. This urgent need Taka-Diastase fulfills in an ideal manner. It possesses an unheard-of amylolytic power, being capable of converting not less than one hundred times its weight of dry starch into sugar under proper conditions. Taka-Diastase is, further, an isolated ferment, free from all foreign substances which might retard its action; is soluble in water, yet non-hygroscopic; is stable, being capable of storage without deterioration under ordinary conditions; possesses an agreeable nutty taste; is perfectly odorless; and can be administered for a protracted period without unpleasant collateral action.

AN INTERESTING COMPARISON.

Naturally the thoughtful physician will at once inquire: "In treating amylaceous dyspepsia, wherein is Taka-Diastase superior to malt extract?" Inasmuch as we have for years produced malt extracts of the finest quality, superior in diastatic potency, in palatability, and in permanence, we feel peculiarly well qualified to answer this question, and commend for consideration the following points of comparison:

1. Taka-Diastase will convert at least one hundred times its weight of dry starch into sugar, under proper tests. The best malt extract manufactured will not convert to exceed five times its weight of starch under exactly the same conditions.

2. Taka-Diastase is absolutely permanent. All malt extracts deteriorate with age, losing diastatic potency and becoming unsightly and unpalatable.

3. Taka-Diastase is concentrated in form, requiring a dose of from one to five grains. Malt extracts contain an immense proportion of foreign inert matters, retarding their action and necessitating large doses.

4. Taka-Diastase, being an isolated ferment, is free from sugar. Malt extracts are heavily loaded with sugar and apt to exaggerate an already present pathological condition.

5. Taka-Diastase is perfectly soluble, and is compatible with other medicaments in neutral or slightly alkaline media. Malt ex-

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tracts, owing to their viscosity, are difficult to handle and to incorporate with other ingredients in prescriptions.

6. Taka-Diastase is economical, owing to its small dosage. Malt extracts are extravagant, owing to large bulk and comparative high cost.

WE CANNOT SUPPLY SAMPLES GRATIS.

Although we have but recently announced our ability to supply Taka-Diastase, the large demands upon us preclude the distribution of free samples. We market the product in small containers—quarter-ounce, half-ounce, and ounce. Physicians desiring to test the new diastase will therefore be put to only a slight expense in purchasing a trial quantity.

WHY WE NO LONGER NUMBER TABLET TRITURATES.

Dr. G. W. Newman, of Tarkington, Texas, expresses to us his regret at our discontinuing the numbering of tablets. He contends that when tablets get mixed together—and the greatest precautions cannot always prevent it where there are children about—the numbers afford the only possible means of classifying. He adds emphatically, "I want *mine* numbered."

The Doctor is in the right, and were we to follow our better judgment we should certainly continue to number our tablets as an additional guaranty against confusion and danger. Why, then, did we ever discard the number system? Simply because it served as a pretext for some of our worthy enemies and haters to endeavor to prejudice the profession against us, by declaring that we numbered our tablets for the benefit of the patient and for the purpose of encouraging the direct patronage of the laity. This absurd charge was made in so many quarters and caused us so much annoying correspondence to set our motives right, that we came to the conclusion that life was too short for so much parley, and that the wisest course was to discard the number system and prevent misunderstanding. To this decision we shall now adhere.

Nevertheless, the numbering of tablets *is* a convenience to the profession, and we maintain that our first course was eminently proper.

APIOL AND ITS THERAPEUTICS.

In the early fifties MM. Joret and Homolle brought to the notice of the pharmaceutical and medical professions in France a succedaneum for quinine, in the form of Apiol, a product derived from common parsley (*Apium petroselinum*).

Numerous investigators following in their path speedily discovered that Apiol was not only the peer of quinine in the treatment of malarial maladies, but superior thereto in those particular forms of malaria developed by visits or residence in the tropics. Cases which refused to yield to the cinchona salts were very readily brought under subjection by means of the parsley derivative.

True Apiol is a camphoraceous body. *It may be separated from the oil of parsley* in perfectly pure white, silky, oleaginous crystals which melt at a temperature of 30° C. It has a peculiar biting, acrid flavor.

THE INFERIOR APIOL OF THE MARKET.

Our repeated examinations reveal the astonishing fact that what is sold as Apiol on the market is usually an oil of parsley with but very minute traces of true Apiol, and often an oil from which the camphoraceous substance has been entirely removed. Some products, notably those possessing the deepest chlorophyll hue, present traces of Apiol varying from 1 to 1½, 2, 2½, and 3 per cent., and it may be readily imagined that the attempt to secure the therapeutic action of Apiol with such an enormous amount of diluent and solvent is a foregone failure!

A TRUE PARSLEY CAMPHOR.

After three years of arduous study and experimentation we are now prepared to offer the pharmaceutical and medical professions a true Apiol—developed as a true camphor and representing the total activity of the seeds deprived of terpenes, stearates, chlorophyll, and other useless constituents.

ITS GREAT THERAPEUTIC EFFICACY.

Among other maladies for which Apiol is especially recommended by physicians in the United States, Great Britain, and France, are inflammations of the genito-urinary tract, particularly cystitis and other renal maladies; in these conditions it perhaps has no equal in soothing, diuretic effects. It is also re-

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garded by all who have experimented therewith as a specific remedy for functional dysmenorrhœa when administered in four-grain doses twice or thrice daily, beginning a day or two before the expected monthly; it may be suspended, save in exceptional instances, a few hours after the flow is established. It is also considered specific in the same manner in true (functional) amenorrhœa. *It is, however, utterly valueless where the amenorrhœa is the result of organic changes, mechanical obstruction, or pregnancy*—indeed, its *harmlessness* in this latter condition has led to its extensive use as a remedy for the cystic troubles which so frequently accompany gestation. *Withal it is a very efficient aid in preventing, and overcoming the tendency to, habitual abortion.* The ease and comfort derived by the gentler sex from the monthly use of Apiol in conditions where it is demanded are beyond measure; it is more certain in effects, and more successful in the relief afforded from the tortures of painful menstruation, than any agent or combination of agents known to the materia medica.

MARKETED IN SOLUBLE ELASTIC CAPSULES.

We shall market this product, which is of a deep red color, in soluble elastic capsules, each containing three minims of a 75-per-cent. solution of Apiol camphor.

DISCONTINUANCE OF THE INDEX MEDICUS

The *Index Medicus* is no more. For years past this work has been published at a loss, and of late the annual deficit has exceeded two thousand dollars. The publisher, Mr. Geo. S. Davis, announced his willingness to continue the *Index* if favored with support sufficient to make the work self-sustaining or, at least, reduce the yearly loss to $500; but the promised subscriptions did not materialize.

It is really a great pity. The suspension of the *Index* is almost a disaster to investigators and authors. But those who will now feel its absence have only themselves to blame. Dwindling subscriptions, tardy payment of moneys due, and the indifference of those who profited by the work, reached a climax during the times of financial stringency. The publisher has been more than generous for a number of years, and his liberal offer to bear a loss of five hundred a year on the *Index* places in an undesirable light the apathy of those who should have helped to perpetuate a work which was ever a credit to American scholarship.

NO GREATER FALLACY.

Old as the hills, ancient as error, is the supposition that boiling water will extract the nourishing, bone- and tissue-building, life-sustaining properties of meat. There could be no greater fallacy. In neither the tea nor the extract is anything absorbed or extracted from beef save the soluble salts. While these salts are, indeed, endowed with a certain power of stimulating transiently, they are utterly devoid of nourishment and are in no sense to be regarded as foods. The true nutrient elements of beef, comprised in the so-called fibrin, are insoluble in hot or cold water, and this fibrin is rejected in its entirety in the manufacture of beef-extract. The worthless, or practically worthless, soluble salts are administered as food to human beings; the really nourishing fibrin is made up into "dog cake!" That the dog fares better than the patient, goes without saying. A cup of hot water containing a pinch of salt possesses all the invigorating virtue of beef-tea.

The great founder of modern organic chemistry, Justus Liebig, bitterly resented the liberties taken with his researches, and repeatedly declared that beef-extract is to be classed with tea and coffee; that it economizes neither carbon for our temperature nor nitrogen for the sustenance of our tissues; that beef-extract merely contains less water than beef-tea; "that it cannot be called food in the ordinary sense."

Sir William Roberts protests against the delusion that "the nourishing qualities of the meat pass into the decoction," and laments "the deplorable waste" of the residual fibrin.

And Dr. Milner Fothergill denounces "the deplorable waste of human life." "Hundreds of our fellow creatures are daily dropping into their graves, unfed, unsuccored, because beef-tea is given as a food—given for what it is not."

Professor Chittenden declares that the resid-

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ual fibre, remaining after extraction, retains all the nutritive matter.

Yet in thousands of households invalids and convalescents are filled with the worthless liquid, while the extract is marketed by the ton. A more striking example of the tenacity of error and ignorance it would be hard to find.

***

The very advantage which we claim for Mosquera's Beef Jelly, Liquid and Solid, is its great nutritive value as a concentrated food. INSTEAD OF THE RESIDUAL FIBRIN BEING REJECTED, as in the manufacture of beef-extract, this fibrin in the Mosquera process is subjected to the digestive action of bromelin, a powerful vegetable ferment discovered by Señor Vicente Marcano in the juice of the common pineapple. BEEF JELLY EMBODIES THE NUTRITIOUS FIBRIN, IN PREDIGESTED FORM READY FOR IMMEDIATE ASSIMILATION, *PLUS* THE SOLUBLE SALTS. In dyspepsia, in convalescence from exhausting disease, in fevers entailing prostration of the digestive function, in emaciation and debility due to impaired nutrition, Mosquera's Beef Jelly is of the highest utility. Hot or cold beverages may be prepared from it with equal readiness. Write for our handsome pamphlet, giving analyses, recipes, and suggestions for use.

THYREOIDIN, P. D. & CO.

Since it is an established fact that we have in the thyreoid gland of the sheep a remedy as nearly specific for myxœdema as is quinine for intermittent fever, it has been deemed desirable from the outset to isolate the active principle or principles of the thyreoid gland, thus rendering it possible to graduate the dose and regulate the action of the remedy. This is all the more indicated, since it has been shown that the active matter in the glands, even when the latter are of equal size, varies considerably.

With this purpose in view, "Thyreoidin, P. D. & Co." has been prepared. Very careful clinical trial has not only established the great activity of this Thyreoidin, but has also shown that it is even more active than the quantity of desiccated glands which it represents.

Formerly liquid extracts were prepared for hypodermatic use, but these have not proved quite satisfactory in practice, causing as they do much pain at the points of injection, and occasionally giving rise to absœsses; the system, too, is deranged, vomiting and diarrhœa often following. There is, moreover, no occasion for the hypodermatic use of preparations of the thyreoidea, inasmuch as clinical experiments have shown that the administration of the thyreoid gland by the mouth yields most satisfactory results.

In the manufacture of "Thyreoidin, P. D. & Co.," fresh and healthy sheep's glands are alone employed: glands of the calf have not proved of equal value. The glands are carefully selected—hypertrophied lobes, such as are often met with, three or more inches long, being rejected. Throughout the process of manufacture the most scrupulous cleanliness and strictly aseptic conditions are maintained.

One-half grain "Thyreoidin, P. D. & Co." is equal to about five grains of fresh gland. The dose for adults is one-half grain two or three times a day, to be increased at the physician's discretion. The patient should be under constant observation by the physician. Overdoses induce palpitation, melancholia, and irritability of temper. In such instances the treatment should be discontinued until the organism has disposed of the excess of Thyreoidin.

"Thyreoidin, P. D. & Co." is put up in the form of capsules, compressed tablets, and tablet triturates. Each capsule and compressed tablet contains one-half grain Thyreoidin; each tablet triturate, only one-tenth grain. The triturates are prepared especially for administration to children. "Thyreoidin, P. D. & Co." is a perfectly stable product, free from offensive odor. It has been used very successfully in myxœdema, psoriasis, cretinism, and obesity.

Nutritive Suppositories.—When heated in conjunction with cacao butter to a temperature equal to that of boiling water, Mosquera's Beef Meal suffers no injury. It has rendered good service in rectal alimentation.

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Practical Therapeutics.

TAKA-DIASTASE.

THE PRODUCTION OF DIASTASE AND OF AN ALCOHOLIC FERMENT FROM FUNGI.

[Reprinted from editorial in London *Lancet*, May 25, 1895.]

Researches have recently been instituted by a Japanese chemist with a view of utilizing the property possessed by certain fungi, during their growth upon suitable media, of exciting both diastatic and fermentative action. The results ultimately obtained promise to become of great commercial importance, while they have also a distinctly interesting bearing upon medicine, not only in bringing to light the eccentricities of organisms and expanding our knowledge of the nature of fermentation, but because one at least of the products—viz., an exceedingly active diastase and probably the purest form of this interesting enzyme ever produced on a large scale—has already its distinct uses in medicine and dietetics. A consideration of these points justifies us, therefore, we think, in devoting some space to an account of this new and important discovery; and at the same time we may append the results of a few experiments we have been able to make in the laboratory with the view of satisfying ourselves in some measure—and therefore, we venture to believe, our readers—as to the validity of the statements made in regard to it.

A JAPANESE DISCOVERY.

The discovery is due to a Japanese chemist named Jokichi Takamine, who, while studying with Professor Mills, F.R.S., at Glasgow University, satisfied himself that better converting and fermenting agents were obtainable, and that the tedious, costly, and not over-healthy process of malting was a clumsy and primitive mode of obtaining a converting agent in the form of the small production of diastase developed at so much sacrifice to the grain treated. On returning to Japan, Mr. Takamine, jointly with Professor Atkinson of Tokyo University, undertook a long and exhaustive series of studies and experiments on many kinds of microscopic fungus or mould-growth, his object being to find a class of plant containing the two qualities of converting starch in cereals into sugars, and the sugars so obtained into alcoholic spirits. The various ferments and processes of the East, as well as of Europe, were one by one investigated only to be discarded by him; the ergots of rye and other plants whose qualities and powers are well known were not neglected; many kinds of bacteria were studied, when eventually this chemist discovered what he required in the fungus of the species *Eurotium oryzæ*, a mycelial of the Aspergillus family whose nature and characteristics were almost unknown. The qualities required and found in this fungus were three-fold—that is, the plant having the two qualities he was seeking had to possess another quality, that of being capable of withstanding a high artificial cultivation or development of the two qualities. The best and most practical medium used for growing the seed of this microscopic fungus is common hydrolized wheat bran, on the flakes of which the plant grows with great rapidity, and whilst growing it, to reproduce its own seed, is fertilized with certain chemical salts, and when matured, a process of about five days' duration, he calls it "Taka Moyashi." When grown for commercial purposes it is not fertilized, neither is it allowed to ripen in the same high-class cultivation in this form, the commercial product being known as "Taka Koji."

"TAKA KOJI" UNDER THE MICROSCOPE.

On examining Taka Koji with a microscope the bran flakes show, after being thirty-six to forty hours in a moist temperature of 80° F., that the roots which spread all over the surface of the bran are literally covered with minute crystals of pure diastase. At the top of the mycelial a small head is formed in which the seeds and pollen are present. While the diastase at the roots is the ferment or agent which converts starch into sugars, the unripe seeds permeated with the pollen, and which may be designated in this condition spores, give rise to the ferment or agent which converts the sugars into alcohol and which now takes the place of yeast, as the diastase replaces malt. Strange to say, when both characteristics of the fungus are at their best in this inferior cultivation as described, their properties are at their highest stage of commercial utility; but should the

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higher temperature and fertilization be resorted to, it is found that the diastase is entirely absorbed from the roots by the seed in the head of the mycelial, which it serves to nourish and ripen, and when the two agents become one, capable of reproducing their genera, it is found to be of little use for either purpose—for converting or fermenting, Mr. Takamine obtains his diastase in an almost pure and concentrated form by the use of percolators, washing the diastase from the bran with water, in which it is soluble, but not so in alcohol, in which it is precipitated. When dried it is of a pure crystalline nature, capable of preservation for any length of time.

PHYSICAL AND CHEMICAL PROPERTIES OF THE PURIFIED TAKA-DIASTASE.*

The purified diastasic product consists of small, tenacious, gummy particles of a light brown color, and somewhat of the appearance of finely broken shellac; it is almost devoid of taste, but it communicates a peculiar sensation on the tongue, indicative of active digestive properties. An analysis which we made gave the following results:

	Per cent.
Moisture	15.46
Albuminoids (N = 3.65)	22.80
Mineral matters, consisting chiefly of soluble phosphate	16.22
Non-nitrogenized matter, probably carbohydrate	45.52

ITS WONDERFUL CONVERTING POWER.

ON TRYING A WEIGHED PORTION WITH A STANDARD STARCH SOLUTION IT WAS FOUND THAT OVER ONE HUNDRED TIMES OF ITS WEIGHT OF STARCH WAS COMPLETELY CONVERTED IN THIRTY MINUTES AT BLOOD HEAT. Doubtless at higher temperatures it would convert even a much larger quantity, it being stated that under favorable conditions it will digest as much as a thousand times its weight of starch. Hitherto the digestive properties of diastase have been appropriated chiefly by using active extracts of malt, which of course contain a large excess of malt sugar, which in certain cases it is desirable to exclude. The use of the "Takamine diastase" therefore offers obvious advantages on this head. It can be employed, for example, for the malting of milk preparatory to drying. It can also be compressed into tablets and in that form be OBVIOUSLY USEFUL FOR A VARIETY OF MEDICAL AND DIETETIC PURPOSES.

THE TWO DISTINCT PROPERTIES OF THE "KOJI," AND THEIR SEPARATION.

As already stated, Taka Koji possesses two distinct properties—namely, diastatic property, or property of converting starch into sugar, and fermenting property. It is exceedingly important from an economical standpoint to separate these two properties, as well from the Taka Koji as from each other—a separation that has never before been successfully accomplished on an economical scale—so that when a conversion is desired the ferment property need not be wasted, and when fermentation is desired only the ferment property of the Taka Koji may be employed without waste of the diastatic property. The ferment portion may be directly separated from the dried Taka Koji, in the form of a fine powder, by sifting the Taka Koji. This powder comprises the bloom of the fungus and possesses fermenting properties in a remarkable degree. The residue left after sifting contains the diastatic property, and may be used as a diastatic agent. These two properties may be extracted together from the Taka Koji by soaking or steeping the same in water, thoroughly stirring and then pressing the mass, the diastatic property dissolving in the water, and the ferment part, insoluble in water, becoming detached by attrition and remaining suspended in the liquid. The soaking or steeping, separating and pressing operations may be repeated as often as may be desired, in order to effect a thorough separation. The ferment may be separated from this solution by decantation or filtration.

THE FUNGUS BOTANICALLY.

Mr. Takamine uses the microscopic fungus *Eurotium oryzæ* with the best results. But other mould fungi belonging to the genus Aspergillus and to the genera Mucor and Penicillium may also be employed. The "Moto" or ferment may be dried and used for all the purposes for which common yeast is

*See editorial on Taka-Diastase, page 25.

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at present used. It is claimed that the Aspergillus yeast for bread-making will work in half the time required by yeast, and will produce sweeter and more wholesome bread. It is, besides, less liable to become sour, as the Moto itself will keep for almost any length of time in ordinary climates and temperatures. It is further stated that the Moto has the power of mastering all injurious and parasitical ferments it may encounter, and of giving off its ferment cells of a perfectly regular and pure kind.

A GREAT FUTURE IN STORE FOR THE TAKAMINE DIASTASE.

It is obvious from the few experiments we have been able to make that there must be a big future for the ingenious process discovered by Mr. Takamine. The simultaneous production of both a starch-converting enzyme (diastase) and of a ferment which, as we have seen, is perfectly reliable and uniform in its action, is a discovery which must have a marked influence upon the brewing and spirit-producing industries.

ITS MEDICINAL APPLICATION.

Apart, however, from this interesting aspect of the new process, which has been carried out on a practical scale in America, it possesses an interest also from the purely scientific point of view, since it is illustrative, as we stated at the outset, of what can be done by paying attention to the requirements and favorable conditions under which organisms will perform a work the results of which may be eminently useful for domestic, industrial, and even medicinal purposes. In the present instance it is probable that the production of pure enzyme by the simple means above described, which will convert an extraordinary weight of starch, is a fact alone of great interest to the profession, in that it may place in their hands an agent which, as they will readily perceive, may be made instrumental for good in a variety of ways. Again, the production of pure enzyme in large quantities is calculated to afford considerable assistance to those engaged in this branch of research and in the task of unraveling the mysteries surrounding the nature and composition of these remarkably active yet unorganized bodies. When the energy of steam was for the first time utilized it was held to be a remarkable fact, but the latent energy existing in the countless microbes at our disposal must be almost beyond conception. In the remarkable process just described, for example, organisms are so, as it were, coaxed that they readily produce first a MIGHTY ENZYME POSSESSING EXTRAORDINARY DIGESTIVE POWERS, and then a ferment which grows on and on, producing volumes of gas and, *inter alia*, a highly combustible body having those powerful and peculiar properties which mark the members of the alcoholic series.*

TAKA-DIASTASE THOROUGHLY TESTED.

BY C. A. MERRIMAN, M.D.

A few weeks ago I procured a sample of Taka-Diastase of Parke, Davis & Co.'s manufacture, through the kindness of Dr. Geo. F. Whitney. I used it, then procured more from their branch house in this city, and, after giving it a thorough trial, I am satisfied it will do all that is claimed for it. Comparatively speaking, it is the only starch-digester I know of. I think it will be used as much or more than pepsin. I shall continue to use it.

This is the *first* favorable report on any new product that I have ever been willing to give.

2511 Forest Avenue, Kansas City, Mo.

A PROTEST AGAINST TORTURE IN TREATING UTERINE DISEASE.†

BY DR. J. J. CALDWELL, F.S.SC., BALTIMORE, MD.

By virtue of the wonderful unity of the nervous system, a lesion of one part may be manifested in remote organs or tissues. Of all organs of the economy of woman, the uterus presents the most remarkable exemplification of this fact. Its pathological states and its menstrual conditions lying in ground debatable between physiology and pathology give rise often to symptoms which would never direct our attention to the uterine ap-

*Taka-Diastase, which gives such great promise as a remedy for starch-dyspepsia, is now marketed by us. See editorial on page 25.—PARKE, DAVIS & Co.

† Excerpt from an article on "Laws of Growth in Relation to the Nervous Centres," in *Charlotte Medical Journal* for January, 1895.

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paratus if we were to appeal *alone* to rational symptoms.

Hysteria in some of its phases, paralysis, hyperæsthesia of the surface of the body, of the special senses of sight or hearing, pain in remote organs, as mammary glands, or pleura, liver, stomach, brain, etc., are examples of some such manifestations; indeed it may be said that there is scarcely an organ which may not manifest symptoms of derangement in consequence of uterine disturbance.

These have been usually spoken of as sympathetic affections, and the uterine lesions attacked with all that rigor can dictate, "musket and bayonet, cannon and chesspot." It is burned with caustic, frozen with cold, and scalded with hot water; scarified and incised; inside sounded, neck dilated and incised, and often left propped up by a horse-shoe, or impaled upon some kind of spike kept *in situ* by perineal bands or thigh straps, and belly-supporters. I regard the uterus as the most abused organ of the human economy; *no man would submit to such treatment*, and I must enter my protest against the torture which only patient and confiding woman could endure. I would suggest that such medicinal treatment as follows would do away with so much surgical interference:

Liquor Sedans, Saw Palmetto, Pichi, Damiana, and Stylosanthes Elatior (P., D. & Co.'s).*

I can, from my own experience in its action, safely recommend the compound (Liquor Sedans) to the profession at large, as I believe it is destined to produce a new era in gynæcology. In irregular, painful, suppressed, and in excessive menstruation, it is almost a specific. In uterine or in ovarian neuralgia, in displacements of the uterus, which give physicians so much trouble and patients so much suffering, this remedy will act like a thing of magic; and when the profession shall have become fully impressed, as it will the more we use it, with its medical virtues, I believe that we shall hear much less of the many operations in gynæcology, and find, no doubt, in the end, that the present fad of cutting and slashing at the cervix could have been well dispensed with in favor of more conservative therapeutic procedures.

I venture to surmise that the pregnant woman would derive great comfort from half-doses of the Liquor Sedans as an anti-nauseant —with or without one drop of Fowler's solution—three times a day or oftener, as might be required. The writer remembers the case of a lady from a neighboring State who was nauseated the week after marriage until the day her babe was born. Nothing afforded satisfactory relief except champagne, which was objectionable for many reasons, but which had to be kept up. *Now*, he would combine with the Liquor Sedans a drop of Fowler's solution, or a drop of beechwood creosote, with or without a tablespoonful of lime-water, expecting, with fair prospect of success, to afford relief to the tortured woman.

Should the stomach reject all remedies, the mixture in question could be given in free doses by enema, in either milk or in some form of broth, where there is danger of too great prostration from the continued nausea or the protracted loss of appetite.

In cases of imperfect erectile power, or in impotency, it appears to exert a desirable tonic influence, like other restorative remedies acting on the same organs. Of equal merit might be here cited such remedies as the fluid extract of *pichi* (*Fabiana imbricata*), from Chili; the fluid extract of *damiana;* the *saw palmetto;* the *yerba santa;* the extract of *vanilla bean;* and last, but not least to be depended upon in such cases, the *Stylosanthes elatior*, which has lately acquired the reputation for a valuable uterine sedative during pregnancy, and a good permanent tonic to give to the muscles of the womb during the process of labor, and also for causing firm involution after that process.

*These remedies are the products of the well known house of Messrs. Parke, Davis & Co., manufacturing chemists.

In disease the gastric membrane is not unlikely to be covered with a ropy mucus which retards solution of a pill or tablet, or which may indeed cause the latter to glide along intact. If the medicament be administered as a powder in an empty capsule, the latter quickly dissolves and exposes its contents to the action of the stomach.

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A SPECIFIC IN THE TREATMENT OF OBESITY.

In the issue for May 15 of the *American Medico-Surgical Bulletin* appears a paper by Dr. Frederick Guttmann on "The Treatment of Obesity," in which the use of Thyreoidin tablets is reported. Five cases are cited in which the results were extremely beneficial, the final one being the author himself, who between May 12 and September 27 reduced his weight from 247 to 227 pounds under an average dose daily of ten grains of Thyreoidin. He was obliged to begin the treatment with two-grain doses three times daily, ordering likewise a diet of meat and fruits with no alcohol and little or no water. Dr. Guttmann concludes:

I have come to regard the thyroid gland of the sheep as a "*specific*" in obesity; one that is free from the dangerous and injurious after-effects, and whose beneficial effects appear within a few months from the beginning of the treatment. The only risk is in beginning with large doses, as palpitations and fainting fits are possible until the patient is well accustomed to the drug. The agent, however, is not to be used indiscriminately. The Thyreoidin has likewise given excellent results in acromegaly, myxœdema, Basedow's disease, and various cutaneous affections. I have tried thyroid gland in pulverized form, and the Thyreoidin of Parke, Davis & Co., and greatly prefer the latter.

AN OBSTINATE CASE OF SYPHILIS.*

BY E. B. MANN, M.D.

August 25, 1894, I was called to see a lady of 45, married, mother of seven children; pale, anæmic, very much reduced in flesh; bowels regular; urine normal in quantity, quality, and appearance; heart action very quick and weak; pulse 120; temperature slightly elevated; no eruption to be seen on the skin. There were some small gummata, about half an inch in diameter, on the middle third of the crest of the tibia; also gummatous deposits in the lymphatic glands about the neck. A subjective symptom was the unendurable headache, which originated in the occipital region and extended along the parietal bone to the supra-orbital region, and was continuous, with slight remission but no intermissions; the pain was diffused over the whole of the side of the head and forehead, and gave to the patient, in the language of Dowse, a "hang-dog look." The headache was decidedly worse at night. The stomach was continuously nauseated; vomiting occurred two or three times an hour, and no nourishment could be retained.

Diagnosing the case as one of syphilitic headache, I prescribed various formulas. Iodide of potassium, alone and in combination with red iodide of mercury, was rejected, as was also sodium iodide. I prescribed various drugs to check or relieve the inveterate vomiting, and when the stomach improved I returned to the use of sodium iodide and mercury biniodide in medium doses; but the latter were not retained. So syr. trifolium co. was next ordered, was retained, and I can unhesitatingly say that I never saw, seemingly, better results follow the administration of any drug or combination of same than after the use of the second pint bottle of this medicine. It was given in tablespoonful doses every three hours when awake. The digestion has improved, headache disappeared, and the lady gained in weight until she looks like a different person.*—Condensed from *Louisville Medical Monthly.*

*Read before the Delaware County (Indiana) Medical Society.

"LIQUOR SEDANS ℞ 2, WITHOUT SUGAR."

BY JOHN ASHBURTON CUTTER, M. D., B. SC., NEW YORK.

Pain in chronic disease is a hard foe to the physician and patient. Morphine to control it only prevents the employment of rational means of cure, to wit, the stopping

*Syrup Trifolium Compound has met with remarkable success and favor since its introduction by us some years ago. It is a strictly non-proprietary remedy, of public formula. Each fluidounce contains the active constituents of:

Red clover blossoms, 32 grains.
Lappa, 16 grains.
Berberis aquifolium, 16 grains.
Xanthoxylum, 4 grains.
Stillingia, 16 grains.
Phytolacca root, 16 grains.
Cascara amarga, 16 grains.
Potassium iodide, 8 grains.

Dose, two teaspoonfuls (8 Cc.) three times a day, which may be gradually increased to a tablespoonful if desired. Literature sent on request.—PARKE, DAVIS & CO.

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of causes. Yet pain must be prevented. From my personal experience I can testify that Parke, Davis & Co.'s Liquor Sedans is an exceedingly valuable aid to the medical man; composed of viburnum prun., golden seal, and Jamaica dogwood, it is a tonic, a sedative, and anodyne. As originally made, sugar was employed; at my suggestion last summer half a gallon of Liquor Sedans without sugar was made up by the firm for personal test with patients. It was feared that it would be unpalatable; the result was the opposite; where the original preparation with its sugar would cloy the taste, the one without did not. Moreover, in cases of fatty and fibroid degeneration, in rheumatism, where one wishes to prevent acetic-acid fermentation, and in consumption, where again acetic-acid fermentation is a *bête noire* of the clinician, preparation No. 2, without sugar, can be employed when desired as tonic, sedative, and anodyne.

One of the worst conditions the physician meets who conscientiously endeavors to stop the course of chronic disease is the complication of uterine disease and tuberculosis. Liquor Sedans was originally gotten up for cases of pelvic disease, but its employment in this dreadful combination of tubercle and uterine disease is indicated and will be of value. Cases of neurasthenia in men suffering much from pain caused by profuse protoplastic colloid discharges in urine (E. Cutter) are helped by this preparation No. 2. This preparation is a good anodyne in cancerous cases. I ALSO BELIEVE THAT MUCH OF THE SURGERY DONE TO-DAY FOR ACHING, SUFFERING WOMEN WOULD BE PREVENTED IF MEDICAL MEN WOULD USE THIS STANDARD PREPARATION, and I advise the No. 2 without sugar in all prescriptions of Liquor Sedans. A woman with a pelvic abscess needs surgery through the abdominal walls or vagina or rectum; but because an ovary is sore and somewhat degenerated in structure, or the womb is enlarged, the knife should not be always employed. One case that particularly arrests my attention now is of a young woman who had borne three children; extensive laceration of the perineum; womb enlarged, sensitive to touch with finger, and especially to internal exploration; subject to spells of unconsciousness and rigidity of body; pain in back, pelvis, and head; dysmenorrhœa; very sensitive to medicine of any nature; was able to take Liquor Sedans in small doses; became pregnant, and bore healthy child at full term, to her great delight, the oldest boy and the only daughter having died of diphtheria in 1891.

The Empty Capsule.—This invention constitutes a specific boon to therapeutics, inasmuch as it offers opportunity to bring remedies in powdered form into direct contact with the secretions of the stomach. In this regard it is superior to the solid capsule whether of the hard or soft variety, since the junction of the two halves offers a *point d'appui* for the gastric juices whereby the capsule is readily softened: the cap curls back upon itself and speedily releases the medicament.

NUCLEIN.

Bleyer, in the *Medical Record*, praises nuclein, after having put this remedy to further clinical tests in the treatment of diphtheria and allied affections of the throat of different degrees of severity.

Of the fifty-two mixed cases herein reported, thirty-five were follicular tonsillitis, eight pseudo-diphtheria, and nine true diphtheria. He gives the results obtained by subcutaneous injections of this most important of defensive proteids, nuclein.

In this relation he states that the nuclein employed in the following cases was manufactured by Parke, Davis & Co. after the formula and under the supervision of Professor Vaughan, with the exception of the four cases reported in the *American Therapist*.

He found that nuclein showed its specific effect upon all these varieties of diphtheria by a prompt action. The form known as angina lacunaris follicularis is a disease in which the surface of the tonsils and fauces is inflamed and is stippled with curdy-white or ash-gray points or patches (in which there is an absence of anything like a deep slough), which usually disappears under appropriate treatment, and which may simultaneously affect a number in one family and even prove fatal.

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Though it has been said by authorities that this is not a true diphtheria to begin with, we are reminded by Hamilton that "many instances of diphtheria commence as angina lacunaris." In diphtheria of this type, fifteen to twenty minims of nuclein hypodermically administered twice in one day, dividing the injections twelve hours apart, gave a most remarkable result within twenty hours in every case. No other remedy was employed, excepting salt-water gargling or douching simply to remove the loose débris lying about the mouth and throat.

In that type known to us as pseudo-diphtheria, the same promptness of action was immediately noticeable, with the one exception that a longer time (three to four days) was needed for a complete recovery.

The earlier in the disease nuclein is administered, the better. As soon as a patient shows any signs of either of the different forms of diphtheria, he should receive an injection of ten minims of nuclein under the skin of the flank or gluteal region, if a child; in men the muscles of the back of the neck, and in women the upper part of the chest, may be selected. When the injection is well driven into the subcutaneous tissue it is not painful, though some numbness is experienced in the vicinity; these feelings have no significance. The pain produced by the injection becomes less at each repetition. Pain is less when the needle is thrust deep into the muscular tissue rather than into the subcutaneous fascia. Nuclein is absorbed in a few moments. In no case is there found to be any local reaction, if antisepsis has been carried out. If the bacterial examination shows that we are dealing with a case of pseudo-diphtheria or follicular tonsillitis, etc., only three injections are necessary, of fifteen to twenty minims each in children up to the age of twelve years; over that, twenty-five to thirty minims, at regular intervals of time. These inoculations will improve the condition within thirty-five hours, dissolving away the membranes and exudations present, and buoying the patient up as if some powerful stimulating tonic was given.

In true diphtheria the injections must be administered for three successive days in doses of twenty-five minims every four hours.

Bleyer can only say that from what experience he has had with the administration of nuclein, it proved itself to be a staunch medicament, and will undoubtedly prove a most valuable adjunct to organo-therapy. Those who will give it an unbiased trial cannot fail to be in accord with his clinical findings.—Abstract in *Therapeutic Gazette.*

INDIGESTION.

A prescription that has given good results in the treatment of indigestion in Dr. Griffith's clinic is as follows:

Oil of cloves, 2 or 3 minims.
Diluted hydrochloric acid, 15 minims.
Tincture of nux vomica, 20 minims.
Compound tinct. of cardamom, 2 fluidrachms.

Mix. To make one dose, given before meals, thrice daily.

The oil of cloves is a most useful carminative, the dilute hydrochloric acid supplies the gastric deficiency, the nux vomica acts well as a tonic, and the cardamom is an agreeable vehicle. If there is much pain, about three minims of spirit of chloroform is a useful addition for its local anodyne and carminative action. If acid eructation is severe, sodium bicarbonate (ten grains) is given instead of the hydrochloric acid; this neutralizes the acids of fermentation that are formed. If there is attendant constipation, half-drachm doses of fluid extract cascara sagrada are given at bedtime. With the diet regulated, and when possible other faults in the mode of living corrected, this line of treatment is eminently satisfactory.—*Polyclinic.*

Quinine undoubtedly exercises its best effects in acid solution. But acid is sometimes a drawback to the exhibition of the drug in this form, while with many the intense bitterness that supervenes becomes a permanent objection. By substituting the crystals (in their entirety, or after they have been reduced to an impalpable powder) and enclosing in the convenient gelatin capsule, the drug obtains speedy release and solution in the stomach; solution will, moreover, be aided by the fluid imbibed in swallowing the capsules.

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NUCLEIN IN DIPHTHERIA.

At a meeting of the Society for Medical Progress of the New York West Side German Dispensary, held April 14, Dr. William Jacobson read a paper on the use of nuclein in the treatment of diphtheria and other contagious diseases. For the introduction of this agent (which is a normal constituent of blood-serum), he said we were indebted to the researches of Prof. Victor Vaughan and Dr. Charles McClintock, of the University of Michigan.* *Out of 200 cases of diphtheria, scarlet fever, and measles*, which were observed during several months, he claimed that there had been only nine deaths, and that in these cases the fatal result was due either to the fact that the nuclein injections were not made until the disease was too far advanced for any remedy to be of service, to necessarily fatal complications, or to lack of proper care or other unfavorable conditions affecting the patient. The theory upon which nuclein was employed was that, as nuclein was found to a greater extent in the blood of healthy than in that of diseased persons, it was the real food upon which the blood tissues fed, and as such was nature's own antitoxin.

Nuclein was first tried on a girl four years of age, who was suffering from diphtheria. The agent was introduced into the system hypodermically and in a very small quantity. It was found that the temperature at first slowly rose, and then had a sudden drop. The pulse soon became normal, and in three days the child showed no sign of disease. The result was so successful that the treatment was resorted to in other cases, and with similar good results. "To treat fever," said Dr. Jacobson, "we must remove the cause, the toxins, and especially, as in contagions, the microbe and its poison. Nuclein is the substance to which the cell owes its resisting power, and if present in sufficient quantity the microbe and its toxin are prevented from attacking the cell, and are ultimately destroyed."—*Boston Medical and Surgical Journal.*

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*It is under the supervision of Professor Vaughan that our Nuclein Solution is produced. And it was our product which Dr. Jacobson employed in his experimental treatment of contagious disease.—PARKE, DAVIS & CO.

RIVAL FORMS OF MEDICATION—THE USE AND ABUSE OF COMPRESSED TABLETS.

The *Practitioner* is an excellent journal published at London, Paris, and Melbourne, by Cassell & Co. In its issue for January, 1895, it discusses editorially the disadvantages of compressed medication, and states:

There are other than pharmaceutical reasons why all drugs should not be given in the solid form. The first is that we have yet to know more of the disintegration and absorption of tablets in the gastro-intestinal tract before they can be ordered universally and indiscriminately. A five-grain tablet of salol placed in a wineglassful of water may break up and fall to pieces within a few minutes, when a similar tablet may pass through the intestines of a typhoid patient and be voided perfectly intact. Salol tablets have frequently been given to disinfect the digestive tract previous to operation, and it has happened to more than one surgeon that on making his incision into the bowel the tablets have tumbled out of the wound as complete as when they were swallowed.

Many drugs owe a great part of their beneficial action to the effect they produce by coming in contact generally with the mucous membrane of the stomach; and a tablet of bismuth or magnesia will have nothing but the irritating effect of a hard foreign substance in many a case of dyspepsia, when the same drugs would give the greatest relief if suspended in an ounce of fluid menstruum. Other remedies, such as pepsin, the mineral acids, various antiseptics, etc., are frequently prescribed with the express purpose of becoming intimately and quickly mixed with the food in the stomach. If given in a solid form this object is, of course, defeated.

Other instances will readily suggest themselves where a great deal of the virtue of a drug is lost if it is dispensed in any but a fluid form. It is a question if potassium iodide is not very irritating to the gastric mucous membrane when given in the concentrated form of a tablet. When given alone it is apt to be very slow of absorption; the addition of ammonia is generally acknowledged to add greatly to its efficacy, and the following is an effective prescription in a portable form:

℞ Potassii iodid., gr. v.
Spirit. ammon. aromat., ℥xv.
Tinct. gentian comp., ad ʒ j.

Ft. dosis. Sig.: To be taken in a wineglassful of water.

We would suggest that the practitioner's aim should not be to get every prescription into tablet form without considering whether his therapeutic object in certain cases will not be better attained by ordering his remedies in a liquid form.

The distinguished editor of the Philadelphia *Medical Bulletin* publishes in the Febru-

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ary number a strong "leader" on the abuse of compressed tablets:

As a general rule, fluid preparations are, by virtue of their more rapid absorption, more rapid in their action than when given in the solid form. Powdered mineral salts dissolve so readily that they may be ranked, in this respect, with the fluids. There are two great objections to the use of tablets—their comparative insolubility, and their possible or probable loss of power in the case of many drugs, from the manner in which they are made. It is believed that the processes employed in their manufacture may effect a chemical change in the composition of active principles. In acute diseases, where we seek a rapid action from potent drugs, compressed tablets are decidedly inferior to the fluid preparations. Aconite, digitalis, opium, belladonna, and similar efficient substances are far better given in fluid preparations or in that of their active principles. It is often well to give the tincture of aconite in relatively small doses, repeated at short intervals, until an appreciable effect has been obtained.

Enthusiastic advocates of the use of compressed tablets seem disposed to trust to them too exclusively on account of convenience in dispensing them, and their portability, which makes them acceptable to the physician and to many patients. We believe, however, that the best results are to be had from a skillful adaptation of different forms of medicines in different conditions and according to the exigencies of each case.

COMMENT ON THE FOREGOING.

The general sentiment of the above is strictly in accord with our own experience and views. While the compressed tablet and tablet triturate have their uses, we think the experience of physicians generally has demonstrated that they are not suited to the general administration of remedies. From the very nature of the case, compressed tablets are dense, solid, hard bodies, slow to dissolve within or without the stomach. But inasmuch as a demand has reached us for these products, we have made them the subject of a careful study, and we hope ere long to present them to the medical profession in a form which will insure their immediate disintegration in the stomach. Experiments with a view to improving our entire line of tablets are constantly in progress.

In this connection we cannot refrain from emphasizing the great advantage offered in the use of empty capsules for the purpose of exhibiting quinine and other medicaments which should reach the stomach in comminuted form. We shall willingly fill a sample quantity of empty capsules for any physician sufficiently interested to apply therefor, and will accompany them, if desired, with a specimen of our Soluble Elastic Capsules of quinine.

Ergot in Goitre.—A young woman had a large double goitre of two years' standing, each tumor being the size of a hen's egg. I treated her by means of semi-weekly interstitial injections of Parke, Davis & Co.'s Normal Liquid Ergot, beginning with six-minim doses, but gradually increasing to ten minims. With the third injection marked diminution in the size of the tumors was apparent, and at the end of the eighth week the case was discharged cured.—DR. L. H. HALLECK, in *Medical Age*.

OUR IMPROVED NUCLEIN SOLUTION.

Encouraged by the excellent results which have been obtained in the treatment of certain diseases by Dr. Vaughan's yeast Nuclein Solution, we have not ceased to experiment along this line in our laboratory with a view to ultimately obtaining a PURE NUCLEINIC ACID FROM YEAST, although at first these experiments fell far short of success. We sought particularly to eliminate from the nuclein the mucus-like, brown substances, notably the albumines, as these seemed to induce decomposition and cloudiness in the Solution, necessitating the presence of a larger amount of trikresol and alkali. Furthermore, in these objectionable products, we had every reason to believe, resided the cause of the pain often following the hypodermic injections. A PURE NUCLEINIC ACID FROM YEAST is now the result of these extensive experiments, which have been persistently followed up during the last twelve months. This acid is in the form of a light yellowish-white powder CONTAINING SIX PER CENT. PHOSPHORUS, and its presence in the Solution can be readily demonstrated by the addition of a single drop of hydrochloric acid to a few Cc. of the Solution, the nucleinic acid being thrown down in the form of a white flocculent precipitate. Our New Improved Nuclein Solution from yeast, prepared in strict accordance

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with the formula of Dr. Victor C. Vaughan, contains one per cent. of this pure nucleinic acid. The Nuclein Solution, however, is not prepared directly from the dry nucleinic acid, since it has been shown that prolonged contact with alcohol—in which all nucleins are insoluble—or drying, reduces physiological activity. For these reasons we have devised a method for producing our Solution directly from yeast of uniform strength in nucleinic acid, thus entirely avoiding all objectionable features in its preparation.

Dr. Vaughan, to whom is due the entire credit of having first introduced nuclein into therapy, has used this Improved Solution during three months past and reports that it is acting better clinically than any nuclein he has ever had of any kind!

Owing to the increased cost of production which the complications of our new process have entailed, we have been obliged to make a moderate advance in the price of our Improved Nuclein Solution.

Palatability and Exact Dosage.—Gelatin capsules afford an almost absolute means of securing relatively exact dosage. The smaller are readily taken by the youngest children, and their advantages in administering quinine and nauseous drugs cannot be overestimated. The empty capsules of Messrs. Parke, Davis & Co., of Detroit, Mich., have never been excelled. They are made of the finest gelatin, are superior in finish, and uniform in size. Another and very important point—caps and bodies are perfectly joined, insuring absolute protection against leakage. —*Southern Practitioner.*

NOT ANY FOR HIM, THANK YOU.*

This custom of dispensing your own medicines is practiced more in the Northern and Western cities than in our Southern cities. Now and then you see a man who says he dispenses his medicines, but very seldom. Still for the past four years there has seemed to be a perceptible tendency in that direction, though it has not become an actuality yet in the South. There seem to be many advantages in having your medicines prepared by careful druggists. You can prescribe just exactly what you want when you send your patient to the druggist with explicitly written directions, whereas by dispensing it yourself you have to take what you have with you, not what you want oftentimes, and the majority of times you tell the patient how to take it and he forgets what you said before you get out of sight, and you do not get the beneficial effects you would have gotten had it been properly taken.

You are not out of money for medicines if you have your medicines prepared at the drug store, whereas if you dispense them yourself you are continually buying, buying, buying. Always out of the very thing you need. Then it takes so much of your time. You measure out two dozen powders or two dozen pills, and it takes time. In the majority of instances the druggist keeps fresh medicines. Among the many other advantages too numerous to mention, there is a pleasure, a gentility, an ease, a great satisfaction as to dosage and proper direction, when you sit before your patient, write your prescription, and send to the drug store. If you have made an error, the druggist is almost sure to detect it, so the patient has two sentinels, the physician and druggist, whereas by giving your own medicines you are liable to give one medicine for another or too much, and your error is never detected till too late. Of course this very seldom occurs, but the possibility is not excluded. Good Lord deliver me from dispensing my own medicines!

Personal idiosyncrasy plays a most important part in the action of laxatives and cathartics: changes in habit, diet, environment, etc., modify the action of such agents to a marked degree. Habituation also renders necessary the use of larger doses. It is the great merit of our regular Fluid Extract Cascara Sagrada that it not only relieves but *cures* constipation, and the dose may in time be progressively *reduced.* We thoroughly believe in the bitter fluid extract, and we consider the bitter principle of cascara sagrada an essential component. If people *must* have a palatable preparation, they will find no better on the market than our *Fluid Cascara Sagrada Aromatic.*

*Editorial in *Charlotte Medical Journal.*

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ON THE VALUE OF SOLANUM CAROLINENSE IN THE TREATMENT OF EPILEPSY.*

In the presence of so chronic and incurable a malady as epilepsy, the introduction into medicine of any remedy which will diminish the number or the severity of the attacks in a certain number of cases is an improvement in our therapeutic measures which is not to be overlooked, and in *Solanum carolinense* we believe such a remedy exists.

While we have not as yet administered it to a large enough number of patients to speak positively as to its therapeutic powers, in the few to whom we have given it it has given promise, which is, to say the least, encouraging.

Our attention has also been called to this subject by an article by Dr. Maxwell, of Indianapolis, in the *Indiana Medical Journal*, in which he concludes that *Solanum carolinense* materially controls epileptic seizures and is worthy of considerable confidence. Several of the observers quoted by Dr. Maxwell employed what is known as the succus solanum, but the preparation which we always used was the fluid extract made by Parke, Davis & Co., giving ten to fifteen drops of the drug three times a day, after meals.

It should be borne in mind in employing empty capsules that the advantages of these convenient aids to medicine are in a large measure lost when the contents are made in the form of a bolus or pill mass with excipient, or when the capsule is packed tightly. In selecting a capsule for the administration of powders, etc., it is always desirable to choose a large size in order that the contained medicine shall be in as loose form as possible.

CLINICAL REPORT ON TAKA-DIASTASE.

BY A. E. NEUMEISTER, M.D.

I have recently treated with this remedy ten cases of amylaceous dyspepsia, with most satisfactory results. All suffered with continuous pain between meals, fullness and distressed feeling throughout the entire intestinal canal, and quite a moist tongue coupled with disagreeable taste, especially marked in the morning upon rising. One case which had resisted all forms of treatment for a period of ten years, and in which the condition of the tongue could not be changed by diet or the administration of any drug, the patient also suffering habitually from waterbrash, obtained permanent relief by the administration of six-grain doses of Taka-Diastase after each meal and just before retiring at night; in all she took but eighteen doses.

Judging from the foregoing, it appears to me that Taka-Diastase is a remedy of especial value, and much more practical in its application than any of the digestive ferments hitherto employed.—*Medical Age.*

SAW PALMETTO AND CASTANEA VESCA IN WHOOPING-COUGH.

BY JOHN WILSON, M.D., LAPEER, MICH.

During a recent siege of whooping-cough in this part of the country, I enjoyed the best success I ever had, with Parke, Davis & Co.'s fluid extract Saw Palmetto, also in combination with the P., D. & Co. fluid extract *Castanea vesca* (chestnut leaves). It usually cures in five to seven days, with relief from the first dose. I have had people send for the medicine from all parts of the country, hearing of its cures from their relatives and friends.

The Pepsin Cordial is doing good work, and the Cascara Sagrada Aromatic (P., D. & Co.) is one of the pleasantest laxatives in the whole materia medica.

An Unequaled Tonic Laxative.—Dr. James Wood declares in the *Brooklyn Medical Journal:*

"No drug has yet been found which will so well restore the lost tone of the debilitated gut and increase the secretion and peristaltic action, as cascara. The action of the drug on the bowel is not sudden, and in my hands, at least, the more sudden-acting cathartics and laxatives have proved harmful. What is indicated is a tonic laxative which will at the same time increase the action and secretion of the gastric, intestinal, and biliary organs."

*Editor *Medical and Surgical Reporter*, Philadelphia.

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THE LIVER AS A CAUSE OF MYALGIA.

In the myalgias so common to this section of country I find a good active cholagogue to be the only remedy needed. Very often patients come to me complaining of being "lame in the back," and they conclude that they have some kidney disease, and in all probability will ask for something to act on the kidneys. Now in my hands the acetate of potash, buchu, hydrangea, etc., are perfectly useless to some. I have given salicylate of sodium and used anodyne liniments externally, all to no purpose; but put such a patient on

℞ Fl. ext. euonymus, 3 drachms.
Fl. ext. chionanthus, 3 drachms.
Fl. ext. chelidonium, 3 drachms.
Fl. ext. berberis vulgaris, 3 drachms.
Fl. ext. podophyllum, 3 drachms.
Fl. ext. nux vomica, 2 drachms.
Glycerin, q. s. ad 6 ounces.

M. Sig.: Take a teaspoonful in water one-half hour before each meal.

This is one of the most useful remedies that I have ever found. For constipation it excels; as a diuretic it is one of the best; as a cholagogue I know of no superior.—Ed. H. Bowling, B.S., M.D., Luster, Durham County, N. C., in *Charlotte Medical Journal.*

Solutions and liquids are, for reasons obvious, the best form for exhibiting medicaments; yet such are not always available, and oftentimes become so objectionable to the patient as to be practically out of the question. An almost equally efficacious means of medication is offered by enclosing in a convenient empty capsule the powdered drug.

FOR DIABETES.

My twenty years of continuous medical practice has dissipated a large amount of early childlike confidence in the prowess of treatment and the implicit, almost religious dependence on my favorite professor's opinion, which, like the average fledgeling, I expected to verify under all circumstances.

It is. therefore, because of the countless degrees of difference possible to the same malady, developed in another patient, that I am cautious about advocating a panacea from the exultant discoverer's standpoint of *Eureka.*

Briefly, the following is an unusually good formula comprising several old remedies, and it *does*, undoubtedly, help (whether temporarily or not) my cases of diabetes. Well, I place it at your disposal, in response to the request you make in your very desirable journal:

℞ Arsenici bromidi, ½ grain.
Codeine phosphat., 10 grains.
Tr. physostigma, ½ ounce.
Fl. ext. cascara sagrada (P., D. & Co.'s), ½ ounce.
Fl. ext. ergot, 5 drachms.
Fl. ext. rhus aromatica, 18 drachms.
Elix. aromatic, 1 ounce.
Glycerin, q. s. ad 6 ounces.

M. Sig.: Teaspoonful in water three times a day, one and a half or two hours after meals, regularly.

With the hope that some of the fraternity may prescribe it and tell your readers how soon it will assist a properly regulated dietary in changing a specific gravity of 1.040 or 1.045 back to 1.020.—Davis A. Hogue, M.D., in *Medical Summary.*

A Capital Remedy for Burns.—Equal parts of Euthymol and glycerin. In some cases wonderful results have been obtained by applying this mixture, and we have no hesitation in recommending it to our readers.

NOT LESS SPEEDY THAN EFFICACIOUS.

In point of speedy, gratifying, and brilliant results, Chloranodyne stands in the foremost rank of efficient remedies. It would be difficult to exaggerate the almost magical relief which it affords in cholera, dysentery, diarrhœa, colics, and in cystic, renal, and uterine diseases. Each fluidounce contains:

Morphine hydrochlorate, 2⅞ grains.
Tinct. Indian cannabis, 46 minims.
Chloroform, 46 minims.
Oil peppermint, 1½ minims.
Tinct. capsicum, 1½ minims.
Diluted hydrocyanic acid, 9 minims.

Adult dose, 15 minims, to be repeated according to indications.

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CLINICAL REPORTS.

Despite the fact that I have long used, and almost daily in my practice, the Gilman chlorodyne, I find in the preparation lately devised by Parke, Davis & Co., and sold under the name of *chlor-anodyne*, a more efficient and elegant combination. I do not hesitate to say that nothing as yet made is quite so satisfactory. The dose is about the same as the old Collis Browne article, while the action is more certain. The smallness of the dose (fifteen to twenty drops) is an advantage over the Gilman chlorodyne, which must be given in drachm doses and is about equally expensive.—Dr. E. P. Hurd, Newburyport, Conn., in *Therapeutic Gazette*.

Chlor-anodyne has justly acquired a high reputation as an anodyne. The formula, as improved by Parke, Davis & Co., we have found most reliable. We have used in doses of from one to thirty drops with very satisfactory results in cases when, on account of idiosyncrasies or other causes, morphine could not be taken. In cases of nausea and vomiting it acts well, allaying the nausea and quieting the patient. It is well adapted to children, to whom we frequently give it in broken doses with admirable results. In dysentery and mucous diarrhœa of children, after the action of small doses of chalk and mercury or calomel, we have found that fifteen drops added to a half-glass of water, of which a teaspoonful may be given, makes an acceptable and efficient preparation, even where nausea exists. It should be given every hour until the evacuations are somewhat restrained, and then a dose after each action until relieved. — *Southern Medical Record*.

INCOMPATIBILITY OF DRUGS.

The *Bulletin of Pharmacy* contains the continuation of Mr. Frank X. Moerk's instructive paper on the incompatibility of drugs. This is a subject which physicians should study. The rapid introduction of so many new drugs and preparations should admonish us that it would be better to carefully study the resulting compounds that may come from the admixture of some of these than to prescribe them too recklessly. One young man —anxious to be in the lead and fearful of not continually doing something new or different from the rest—lately prescribed a mixture of antipyrin and spirits of nitric ether for the use of a patient, which the more intelligent druggist luckily postponed filling. . . . . It is well enough that druggists educate themselves, and can save the patient from the result of such blunders, but a physician should not depend upon such an accidental safety-valve for the safety and life of his patient. Mr. Moerk's paper is one that should be read by all prescribers, as it points out many of these incompatibilities.*—*National Popular Review*.

GASTRIC NEUROSES.

In a paper read by Dr. Herman E. Pease, before the Tri-State Medical Society, on the diagnosis and treatment of gastric neuroses, the author refers to the "new remedies that are promising wonders in the cure of those old cases where, from nervous action, the cell secretion in the stomach and intestines has been altered for so long a time that organic change is taking place—chronic nervous dyspepsia. One of these is nuclein and its class, as urged for nearly all chronic conditions by Dr. Victor C. Vaughan, of Ann Arbor, Mich., John F. Aulde, of Philadelphia, and others. Parke, Davis & Co. manufacture it and can furnish literature concerning it."

SOME EXPERIENCES WITH THYROID FEEDING.

Dr. Leo Stieglitz, of New York (*New York Medical Journal*, May 4), reports four cases where he had employed thyroid extract.

1. This was a marked case of myxœdema. She was ordered five grains of Parke, Davis & Co.'s desiccated thyroid daily for first week, then twice a day for second week, and three times a day afterwards. The patient made a very rapid and marked improvement.

2. This case was ordered daily a five-grain tablet of thyroid extract. Within a few days improvement began.

3. This case had *la grippe*, and following this considerable swelling in the feet. There

*Specimen copy of *Bulletin of Pharmacy* sent free on application to Geo. S. Davis, Publisher, Detroit, Mich.

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followed distinct patches of scleroderma circumscriptum. She was put on the desiccated thyroid of Parke, Davis & Co. Improvement began under this treatment and progressed steadily.

4. This was a case of progressive hemiatrophy facialis. She was treated with thyroid extract. The treatment was given a fair trial, but with no improvement to the atrophy. The treatment appeared, however, to improve the spasms of the face that afflicted the patient a great deal. When the treatment was omitted the spasms returned, and again improved on the resumption of the treatment.

PEPSIN PREPARATIONS.

In the last issue of this journal,* it will be remembered, we took occasion to discuss some recent literature on pepsin, in which was pointed out the need for care in the study of the digestive ferments, from the fact that they were extremely delicate and were liable to meet with incompatibles, either in the shape of medicines or food, or that they might be misapplied by reason of the physician not observing the proper period for their administration. We neglected to say, however, as to the best preparations of this class, that the experimental tests of the chemists showed conclusively that Messrs. Parke, Davis & Co., of Detroit, Mich., were entitled to carry off the palm.

Probably no other manufacturing house in this country has done so much towards placing the treatment of disease upon a truly scientific basis, by supplying the profession with most complete literature upon every new drug introduced; and with the thoroughly reliable and perfectly finished products which they are prepared to supply physicians, they have claims for attention which should not be overlooked.

It is idle to talk of beef-extract as food: it is merely a stimulant. The nutritious part of meat—rejected in the manufacture of beef-extract—is the insoluble fibrin. In MOSQUERA'S BEEF JELLY the fibrin is predigested; hence the Jelly is a true food, ready for immediate assimilation.

* *Medical Register.*

Ideas Communicated by Readers

The Best Method of Administering Tincture of the Chloride of Iron.

Julia W. Carpenter, M.D., Cincinnati, O.: "Of all the preparations of iron, there is one for which no other can be a substitute. This is the tincture of the chloride. Its objections, as all know, are that it will stain and can injure the enamel of the teeth. To prevent this injury, I have for years given this preparation in empty capsules. The patient or attendant drops it in the capsule at the moment it is to be taken, always after eating, never on an empty stomach. With a common dropper the capsule can be neatly and quickly filled, to be swallowed at once. No trace of the medicine can be found on the teeth."

[Doctor, have you ever tried our palatable Syrup Iron Chloride, Weld's? It is entirely devoid of corrosive action on the teeth. Each fluidounce represents forty drops of the tincture, and when diluted with four or five volumes of water this syrup yields a grateful mixture. It should under no circumstances be mixed with mineral or other alkaline waters.—ED. NOTES.]

For Administering Creosote.

Dr. G. A. Harman, ex-Major-Surgeon, Lancaster, O.: "Your remarks on the uses of capsules prompt me to tell how nicely creosote with other unpleasant remedies can be given in them. For each No. 2 capsule I prescribe:

℞ Quinine sulphate, ½ grain.
Pure pepsin, 1 grain.
Bismuth subnitrate, 2 grains.
Strychnine sulphate, $\frac{1}{10}$ grain.

"This powder may be changed or any other substituted.

"When a capsule is to be taken, its cap is removed; a knitting-needle or piece of wire is pushed down through the powder and moved round so as to make a little cone-shaped cup in the powder; then with a dropper the patient drops from one to five drops of creosote into it. The capsule is recapped and swallowed, and an unpleasant dose is taken without tasting."

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A Striking Gain—Infantile Marasmus.

Alfred de Marconnay, M.D., West Berkeley, Calif., favors the NOTES with a recital of two interesting cases:

Case 1.—Pierre C——, æt. 26; bartender in French liquor store; chronic bronchitis with partial aphonia. Bacteriological examination revealed *no* tubercle bacilli, but quite a marked disposition to get and cultivate them. Prescribed P., D. & Co.'s Lofoten Cod-liver Oil, one bottle. The patient's appetite and aphonia were much improved after the first bottle; microscopical as well as macroscopical examination of throat and sputa showed a marked improvement. Another bottle was prescribed and is just finished—patient complains only about fullness and tendency towards constipation, which I try to remedy more by diet than by therapeutic agents. Result: Very gratifying.

Case 2.—Melanie S——, æt. 5; infantile marasmus; P., D. & Co.'s Lofoten Cod-liver Oil in two-teaspoonful doses in some port wine twice a day for two weeks, and then half this dose three times a day, saved the child after having been declared incurable by my *confrères* of the French Hospital.

Fluid Extract Coto Bark in Severe Dysentery.

Dr. J. S. Brown, Los Angeles, Cal., describes a very interesting case: "Last summer I had a patient 76 years old, suffering from extremely severe dysentery. The classical treatment and consultation with a veteran practitioner of thirty years' experience proved equally futile: the twelve to fifteen bloody passages continued to occur every day. Finally, in my despair, I procured some of P., D. & Co.'s fluid extract Coto Bark and gave patient one drop every hour. The second day there was an improvement, which continued, and within two weeks I discharged her cured. She has been well ever since. Meantime I have used your fluid extract Coto in several less severe cases with perfect satisfaction.—During the winter I have had a number of cases of vesical catarrh, and have treated them very successfuly with P., D. & Co.'s fluid extract Pichi."

A Good Suggestion.

Dr. H. J. Achard, Manchester, N. H.: "Allow me to add another point to your excerpt on page 24 of No. 1, in regard to giving cod-liver oil. The oil must always be kept in a cool place, and the outside of the bottle, as well as the cork, must be kept scrupulously clean. I am in the habit of telling my patients to change the cork every few days, or to boil it frequently in water to which a pinch of borax has been added.

"It may interest your readers to learn that an ordinary Grave's speculum will do very well in Sims' position. I get with it nearly all the advantages of the position in my gynæcological work, and am not dependent on an assistant. As a further advantage, I will say that the speculum will stay in place very well if the patient is in correct position, and that thus the operator can use both hands."

Jambul in Diabetes.

Dr. Wm. A. Clark, Trenton, N. J.: "I have been using of late, with very gratifying results, Parke, Davis & Co.'s fluid extract Jambul in the treatment of diabetes mellitus."

Dr. W. F. Carver, La Otto, Ind., adds his testimony: "Jay C——, æt. 30, came under my care in September, 1892. Had been under treatment for diabetes for two years, and had grown steadily worse. I put him on fluid extract Jambul Seed (P., D. & Co.), 10 minims four times a day, gradually increasing the dose to 20 minims and then to 30 minims four times a day. At bedtime gave codeia, 1 grain. Result: Decrease in amount of urine and sugar—*not apparent, however, for about three months.* To-day patient is well. Physicians should be told that it is the long-continued action of Jambul which does the work."

Antiseptics in Obstetric Practice.

G. B. Gillespie, M.D., Covington, Ky., reports in the *Medical and Surgical Reporter* that in examining and preparing parturient women, "the hands should be thoroughly washed with hot water and soap. I generally use Johnston's Ethereal Antiseptic Soap, scrubbing with a nail-brush, drying my hands on a clean towel, and dipping them in a 2-per-cent. solution of creoline before making a vaginal examination. . . . . Dirty and careless midwifery is, to-day, a too fruitful source of pelvic disease."

[Johnston's Ethereal Antiseptic Soap is a product of our introduction. Write for descriptive circulars and reports.]

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Inveterate Constipation.

J. C. Mitchell, M.D., Louisville, Ky., reports the following interesting case: "Mr. M——, 83 years of age, had been troubled with constipation all his life. His mother died of its complications. I prescribed Fluid Cascara Sagrada Aromatic (P., D. & Co.), fifteen drops three times a day, until his stools were regular and of proper consistence; then reduced to twice a day. He reports a complete recovery. He had also suffered from hæmorrhoids, which have been entirely relieved. I am delighted with the action of the Aromatic in all cases in which I have used it."

Grindelia Robusta.

Dr. Geo. F. Dunham, Wenona, Ill.: "I find this remedy particularly successful in coughs. Whether from reflex causes, from bronchitis, asthma, or, in fact, any other cause, relief is often afforded by Grindelia. In any respiratory difficulty in which I am told the patient 'dreads going to sleep for fear of losing his breath,' Grindelia can be given with assurance of relief. In ivy poisoning it is almost specific *locally applied*. The itching and *burning* are relieved at once. I use a tincture or the fluid extract (P., D. & Co.'s)."

Improved Lofoten Cod-liver Oil — Anodyne Pine Expectorant.

E. U. Simmons, A.M., M.D., Erie, Ill., writes in high praise of our Lofoten Oil, and states: "I shall hereafter prescribe no other kind."

Austin T. Fink, M.D., Freedom Plains, N. Y.: "My wife, suffering for years from bronchial asthma, has a very, very weak stomach, and yet your Cod-liver Oil has not created the slightest nausea.—Your Anodyne Pine Expectorant is certainly the best cough mixture I know of. I use no other."

Hæmaturia Cured by Cubebs.

F. S. Whaley, M.D., Compton, Calif., sends us an account of a case of hæmaturia of seven years' standing; patient aged 70. "An infusion was made by putting a tablespoonful of powdered cubebs into a teacupful of boiling water. This was taken to his bedside and a tablespoonful administered. In a very few days all hæmorrhage ceased, and he soon regained his usual health without any recurrence of hæmorrhage. He lived twelve years after this, and died from the decrepitude of old age."

Thank You, Doctor.

Dr. R. E. Ryan, Churchville, West Va.: "I must say that THERAPEUTIC NOTES is the finest small journal of indispensable and practical information I ever read. I gladly forward coupon for this little jewel.

"Your Liquor Sedans, Syrup Trifolium Compound, Syrup Hematic Hypophosphites and Fluid Extract Cascara are perfect remedies, both pharmaceutically and therapeutically. I am prescribing your Trifolium nearly every day."

The Woodbridge Treatment of Typhoid.

Edgar I. Bradley, M.D., Turner, Ill.: "I have proved conclusively, to myself at least, that the position taken by Dr. Woodbridge is entirely within the bounds of reason, and that typhoid fever *can* be aborted by the use of the three formulas originated by Dr. Woodbridge and manufactured by you."

Copper Arsenite in Bowel Affections.

Dr. E. Johanning, Mt. Healthy, Ohio, finds Copper Arsenite (administered in the form of Parke, Davis & Co.'s tablets) very efficient in the diarrhœa of typhoid and other bowel affections. He has used the remedy with good results in dysentery, intestinal catarrh, and cholera infantum.

Sulphuric Ether for Cleaning Syringes.

Dr. W. H. Shimer, Meyersville, Texas, finds Sulphuric Ether more efficient than alcohol for cleaning hypodermic syringes. He states that he has used Parke, Davis & Co.'s tablets and syringes (cleaned with ether) for the past five years, without causing a single abscess during that period!

A Superior Preparation.

Dr. James T. Hurd, of Galeton, Pa., states: "I can especially recommend your Fluid Cascara Aromatic as superior to all other tasteless cascaras."

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Favorite Formulas.

Dr. J. T. Walton, San Antonio, Texas: "Your Syrup Trifolium Compound and Liquor Sedans are favorite formulas of mine. I use them constantly. The Trifolium is emphatically the most reliable and effective alterative combination now upon the market."

A Reliable Syringe.

Dr. R. Elmer Green, Kewaskum, Wis., writes of our hypodermic syringe: "It is truly a gem. It is superior to any instrument I have ever used—aseptic, neat, compact, durable. Your hypodermic tablets are surprisingly soluble and never inert.'

Passion Flower in Puerperal Mania.

Dr. T. R. Dice, Utica, Mo., reports the successful use of our fluid extract *Passiflora incarnata* in puerperal mania. In a case of insomnia from neuralgia the same preparation gave sound sleep, with cheerful spirits in the morning.

Normal Liquid Cannabis Indica.

J. C. Reinhart, M.D., Toledo, O.: "I never could get any satisfactory result from the administration of *Cannabis Indica* till I tried your Normal Liquid. By the way, those Normal Liquids of yours are strictly *first class.*"

Best of Its Kind.

Morgan Clack, M.D., Rockwood, Tenn.: "I am and have been using Anodyne Pine Expectorant for a long while. I know it to be one of the very best preparations of its kind in the world. I often prescribe it daily."

Potassium Permanganate for Mushroom Poisoning.

W. A. Peterson, M.D., Elgin, Neb.: "I wish to suggest to the readers of THERAPEUTIC NOTES the testing of potassium permanganate in mushroom poisoning."

A Love-Tap for the Yankees.

Dr. Constantineau, of St. Jean de Baptiste de Rouville, P. Q., writes: "Your THERAPEUTIC NOTES are short and sweet, as Yankees alone can write them."

Gleanings.

Use black pins in surgical dressings; they will not rust and can be more readily seen.

Migraine.—It is stated that ten drops of fluid extract saw palmetto has aborted many cases of sick headache.

Nocturnal Enuresis.—The best remedy for bed-wetting in children is normal liquid ergot.—*Kansas Medical Journal.*

The administration of Pepsin Cordial to infants and delicate persons suffering from vomiting and indigestion is usually followed by immediate relief.

Five to twenty-five minims of our fluid extract cocillana given in chronic bronchitis, it is stated, secures expectorant effect without depression, while it increases appetite.

Uterine Inertia. — Give normal liquid ergot. Put a drachm in fifteen teaspoonfuls of water, and beginning early give a teaspoonful every ten or fifteen minutes.—*Medical Age.*

Euthymol will be found a most valuable adjuvant to the diarrhœa mixtures prescribed for children with entero-colitis and kindred troubles. As an internal antiseptic it is unexcelled.—*Medical Times.*

Gelsemium in Parturition. — Normal Liquid Gelsemium is successful in affording relief in that condition of labor characterized by thick, rigid cervix with cutting abdominal pains.—DR. HOWELL, in *Medical Age.*

Justus Liebig declared that beef-extract "cannot be called food in the ordinary sense." Mosquera's Beef Jelly is a valuable food and represents *all* the elements of the beef—the nutritious fibrin as well as the soluble salts.

For Migraine.—Gelsemine hydrochlorate in doses of one-fiftieth of a grain, given hypodermically, acts admirably in relieving this annoying trouble. The preparation used by the writer was made by Parke, Davis & Co., Detroit.—EDITOR *Texas Sanitarian.*

After the Delivery of the Placenta.—

℞ Fl. ext. ergot, 15 grammes.
Fl. ext. hydrastis, 15 grammes.
Fl. ext. hamamelis, q. s. ad 60 grammes.

M. Sig.: Teaspoonful three times a day.

—STUVER, in *Medical Record.*

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The Vessel Worthy of its Contents.—"I cannot but remark on the very neat and tasteful manner in which all your preparations are put up, making their exterior a reflection of their inner excellence."—H. J. ACHARD, M.D., to Parke, Davis & Co.

Constipation. — Do not let your mind dwell upon podophyllin, magnesia salts, and the like, but prescribe normal liquid nux vomica, one drop in half a glass of water every night at bedtime. This will effectually relieve many cases of habitual constipation.—*Exchange.*

Menorrhagia and Metrorrhagia.—

℞ Fl. ext. golden seal (P., D. & Co.), 4 drachms.
Fl. ext. ergot (P., D. & Co), 1 ounce.
Strychnine sulphate, 3 grains.
Tincture iron chloride, 12 drachms.
Elixir or syrup, to make 8 ounces.

Teaspoonful three times daily, after meals.

A good preparation of ergot should contain the alkaloids as presented in their natural combinations, and represent all the active elements of the drug. It should be perfectly miscible with water and adapted to hypodermatic use. Such a preparation is our standardized Normal Liquid Ergot.

The Difference.—No beef-extract can possess value as nutriment, since in its manufacture the nutritious part of the meat—the insoluble fibrin—is rejected, only the soluble salts being extracted. But MOSQUERA'S BEEF JELLY contains the valuable fibrin in a *predigested* form. It is beef-extract *plus* assimilable fibrin.

For a Digestive Tonic, prophylactic against biliousness, and a remedy for the ready relief of constipation, dyspepsia, anorexia, and mal-assimilation, we unhesitatingly recommend Parke, Davis & Co.'s "Lime Juice and Pepsin." A complete descriptive circular and price list will be sent to any who will write for it.—*Eastern Medical Journal.*

Constipation in cases of flatulent dyspepsia is efficiently corrected by the following:

℞ Tincture nux vomica, ½ ounce.
Fl. ext. cascara sagrada (P., D. & Co.), 2 ounces.
Tincture cinchona comp., q. s. ad 6 ounces.

M. Sig.: To be taken before meals, in teaspoonful doses.

—*Kansas Medical Journal.*

Digestive Power. — As distinguished from all similar products, Pepsin Cordial contains sufficient pepsin in a potent condition to justify its employment in those cases where the application of commercial pepsin in uncombined form is impracticable. One teaspoonful will dissolve 2,000 grains of coagulated and disintegrated egg-albumen, and is more acceptable than a corresponding dose of saccharated pepsin.

Constipation Due to Perverted or Deficient Intestinal Secretion.—

℞ Fl. ext. cascara sagrada (P., D. & Co.), 1 ounce.
Simple syrup (or malt extract—P., D. & Co.), 1 ounce.
Water, 1 ounce.

M. Sig.: A teaspoonful three or four times daily.

Vomiting of Pregnancy.—A writer in the *Lancet* says: "I have not failed once for many years, by a single vesication over the fourth and fifth dorsal vertebræ, to put an end at once to the sickness of pregnancy for the whole remaining period of gestation, no matter at what stage I was consulted. The neuralgic toothache and pruritus pudendi of the puerperal condition yielded as readily, and to one application."—*Medical and Surgical Journal.*

It is admitted by all that one of the causes which incites and perpetuates gastric and intestinal inflammation is undigested, or partly digested and fermenting, milk or other food, the decomposition of which is accompanied by the development of ptomaines and other toxic principles. It is as an aid to the removal of this cause, by digesting fermented undigested food in the stomach, that Pepsin Cordial is indicated in infantile diarrhœa, and its efficacy in this field has been attested by many well known medical writers.

Dysmenorrhœa.—In the *Therapeutische Monatshefte*, Dr. Schwarze discusses this condition when associated with ante- and retroflexion of uterus, and lays special stress upon the value of gymnastics and massage; he however remarks that the latter is not available in well developed non-anæmic women. Also in non-inflammatory cases, Liquor Sedans gives brilliant results which are not to be obtained with any other remedy. He recommends a teaspoonful three times a day, given five to seven days before menstruation.

Not Half Bad.—In deploring the excessive multiplication of proprietary and pseudo-scientific remedies, Dr. A. L. Blesh, Guthrie,

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O. T., speaks bitterly of the methods by which secret nostrums are first urged upon the profession, and their endorsement then utilized to create a demand among the public. "If this thing continues long at its present rate," says the Doctor, "the time will be measurable when prescribing will be among the lost arts, and our colleges, to keep abreast of the times, will have a Professor of Proprietaries."

Ethereal Antiseptic Soap, introduced by Mr. J. Johnston, of Philadelphia, is put on the market by Parke, Davis & Co. It is an ethereal solution used for cleansing the skin in vaccination and more important surgical operations, and the hands of the surgeon after examinations, operations, etc. A little poured on the hands makes a profuse lather which will remove vaselin, iodoform, or organic matter very promptly and effectually. Chemists reckoning surgeons among their patrons have found it advantageous to introduce this preparation to their notice.—*Chemist and Druggist of Australasia.*

Good Counsel.—Says the *New York State Medical Reporter:* Physicians in writing prescriptions should specify pills of the best make they know of, and they will be more certain of obtaining the therapeutic effects upon which they calculated. This applies not only to pills, but to all articles of merit in and out of the Pharmacopœia. There are as bad fluid extracts on the market as there are good ones, and we are sure that it is the duty of the practitioner to indicate on his prescription the maker whom he thinks to be reliable. Every successful preparation has its imitations, and the imitation is impertinent testimony of its value and success.

The editor of *Practical Medicine*, Dr. Chas. H. Stowell, states: "We are in receipt of some samples of empty capsules from the house of Parke, Davis & Co. To our best knowledge these have never been excelled. They are made of the finest gelatin, are superior in finish and uniform in size. Another and very important point—caps and bodies are perfectly joined, insuring absolute protection against leakage. No more convenient method of administering a rectal suppository can be had than by enclosing the medicament in one of these capsules. By moistening the capsule externally, its introduction is rendered painless, and its speedy solution assured."

Ferratin in the Treatment of Anæmia.—Kündig (*Deutsches Archiv für Klinische Medicin*) describes the preparation of Ferratin and some experiments on animals, which go to show that the preparation is absorbed into the organism. He reports twenty-five cases. In all the cases the appetite improved, and in cases where there was complete anorexia the appetite was regained. This was especially noticeable in cases of phthisis. The drug was easily administered and did not cause vomiting. The digestion was not interfered with, and it was especially noticeable that the movement of the bowels remained regular. In all cases the anæmic symptoms disappeared more quickly than they did after use of other iron preparations. The actual blood condition improved less markedly than the general condition of the patient.*—*University Medical Magazine.*

Dr. Ernest B. Sangree, of Philadelphia, replies to an inquiry in the *Medical World* thus: "If, instead of the cod-liver oil he has been using, Dr. Carton will have Parke, Davis & Co.'s improved Lofoten oil asked for, he will find that no disguising will be needed. This oil is as near perfection, probably, as ever will be reached. It flows as easily as water, is the pure oil, with only the faintest suggestion of its fishy origin, and the addition of a little wintergreen and maybe some other aromatics gives it an agreeable odor. If, however, even the modicum of taste there should be objectionable, if he will have his patient first chew a clove, I think he will find the oil glide down without annoyance. For the time being the clove partially paralyzes the nerves of taste, and nauseous things can be slipped into the stomach without, as it were, the mouth's knowing anything about the matter."

Rectal Feeding in Ulceration of the Stomach.—In the course of a very instructive article on gastric ulcer, Dr. Deering J. Roberts, editor of the *Southern Practitioner*, states: "And now in conclusion, permit me to suggest a very important measure of rectal administration of food. We have prepared by our different capsule-manufacturers, and by no one so well as Parke, Davis & Co., a No. 12 capsule made for the horse; I have found it do most excellently for rectal feeding. A No. 12 capsule will hold nearly, if not fully, one-half ounce of meat extract. Put a little vaselin, lard, or even olive oil, on the end. It is most readily introduced, and the contents will be assimilated."

[Instead of meat extract or juice, we

* Ferratin is marketed by us in powder and in tablet form.—PARKE, DAVIS & CO.

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strongly recommend Mosquera's Beef Jelly, which combines the *nutritious fibrin in predigested form* with the soluble salts of which beef extract is exclusively composed.]

The use of antitoxin does not preclude local treatment of diphtheria. W. L. Conklin, M.D., Rochester, N. Y., states in a paper on diphtheria, read before the Rochester Pathological Society: "The use of antitoxin does not preclude the employment of many local disinfectants. Roux objects to the use of solutions of bichloride and carbolic acid, but advises irrigating the throat three times a day with a solution of boracic acid or of Labarraque's solution, 1½ ounces to a quart of water. Loeffler recommends a solution composed of menthol 10 grains, toluene 36 Cc., then add creolin 2 Cc., iron chloride solution (4-per-cent.) 4 Cc., alcohol to make 100 Cc.—to be applied every three or four hours by means of a pledget of cotton, after the mucus has been wiped from the throat. This solution is put up by Parke, Davis & Co. A similar solution was used in ninety-six cases, three-fourths of which had been verified by bacteriological examination, without a single death."

C. C. Edson, M.D., Dunkirk, Ind., contributes an article on "La Grippe" to the *Medical Summary* for April. "For the hacking cough," he writes, "which is often very annoying, I give the Brown cough-mixture tablets, made by Parke, Davis & Co., permitting them to be taken *ad libitum* by being dissolved on the tongue and then swallowed.

"The laxative or cathartic used in this case, as in a great majority of all my cases, is a pill made from my special formula by Parke, Davis & Co., and each pill contains:

℞ Aloin, ⅙ grain.
Podophyllin, $\frac{1}{75}$ grain.
Capsicum and nux vomica, each ⅛ grain.

Dose: One to four, according to the effect required, and repeat at intervals as appears necessary.

"While one of these pills would not be an overdose for a child a year old, they will prove very effective in almost any case—if persevered with and you are not in too much of a hurry, as it takes usually about twelve hours to get the full benefit of a dose."

Syrup Hematic Hypophosphites.—In nervous exhaustion, in depraved nutrition, in debility and anæmia, in all scrofulous and tubercular affections, our Syrup Hematic Hypophosphites is widely prescribed. Each fluidounce contains:

Potassium hypophosphite, 1½ grains.
Manganese hypophosphite, 1 grain.
Strychnine hypophosphite, ⅛ grain.
Iron hypophosphite, 1¼ grains.
Calcium hypophosphite, 1 grain.
Quinine hypophosphite, $\frac{1}{16}$ grain.

It will be remarked that the medicinal constituents of the syrup are present in very small proportion. But in the debilitated conditions in which the preparations of the hypophosphites are usually prescribed, minute doses often exert a more favorable influence than the full doses which the physician is tempted to prescribe. In cases of nervous exhaustion especially, recuperation is necessarily slow, and medication to be successful must be based on the maxim "*Festina lentè.*"

The combination of remedies is one adapted to a great variety of diseased conditions. Physicians will, however, in view of their knowledge of the constituents of this preparation, be able better than we to recognize the rational indications for its use.

Pityriasis.—Dr. De Friste Voght, of Cleveland, O., in pityriasis capitis and facialis, advises that the parts affected be washed with warm water and boracic-acid soap two or three times a week, making a lather of the soap and rubbing it into the parts, so that it comes in contact with the diseased surface of the scalp and face, and then washing off with warm water and rubbing dry. When the scales stop forming and the parts become smooth and clear, should the scalp become very dry the following may be applied:

℞ Ungt. hydrarg. ammon., 1½ drachms.
Ungt. aquæ rosæ, 1 ounce.
Euthymol, 1 drachm.

Make ointment. Sig.: Use externally daily.

A small quantity of the ointment should be rubbed into the scalp daily, and the following taken internally:

℞ Fl. ext. Berberis aquifolium (P., D. & Co.), 2 ounces.
Simple syrup, 2 ounces.

M. Sig: One teaspoonful three times a day, after meals, with water.

Should constipation exist, the fluid extract of cascara sagrada may be added to the above. The *Berberis aquifolium* should be continued for some time after the disease has disappeared.

Locally, to the face apply several times a day:

℞ Sodium borate, 1½ drachms.
Glycerin, 2½ drachms.
Rose-water, 6 ounces.

M.

—*Louisville Medical Monthly.*

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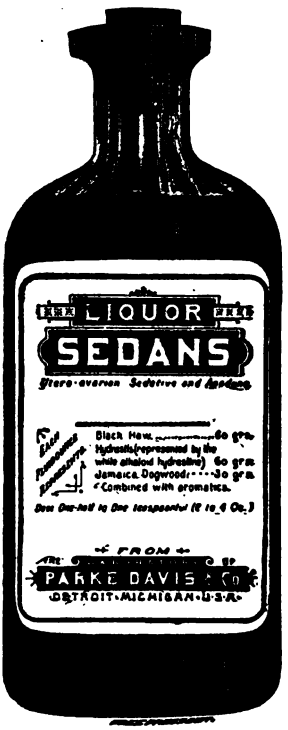
LIQUOR SEDANS



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Efficient in the treatment of dysmenorrhœa and many utero-ovarian irregularities once deemed amenable only to surgical procedure.

Reports from private and hospital practice, with trial package, to physicians willing to defray expressage.

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"I find **Pepsin Cordial** a most satisfactory remedy in infantile diarrhœa, and all summer complaints due to faulty digestion and an acid condition or ferment in the alimentary canal. In diarrhœa with green acid discharges, in cholera infantum, in nausea and vomiting, its action is culminative and decisive."—CHAS. KELLY GARDNER, M.D.

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A New Blood-Iron Albuminate : : : :

CONTAINS in a soluble form all the albuminates and salts (hæmoglobin, paraglobin, serumglobin, phosphates) present in the blood, without, however, any of the objectionable excretory products—fibrin, urea, etc.

A dark brown powder of a slightly acid taste, fairly soluble in cold water, and easily soluble in hot water without being coagulated. Furthermore, freely soluble in diluted alcohol, a most desirable property, since it renders its administration possible with alcohol-containing restoratives (as wines, etc.). It is perfectly stable, and one part corresponds to about six parts of fresh healthy bullock's blood.

May be specially recommended in cases where other iron albuminates have proved unsuccessful.

Dose:—Eight to sixteen grains, three to five times a day—preferably in gelatin capsules, or dissolved in warm water.

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. . . . IN . . . .

SOLUBLE ELASTIC CAPSULES.

Also Capsules of Oleate of Mercury.

At the request of some of our patrons, we have introduced these capsules to obviate some of the objectionable features hitherto connected with the external use of mercury.

Inunction is frequently the method preferred for the exhibition of mercurial treatment, since it is equally certain in its effects and is a method very much less liable to cause general derangement to the patient than exhibition of any mercurial *per os.* The digestive disturbances of a lengthy mercurial course by the stomach are sometimes sufficiently grave to call for the intermission of the remedy for more or less protracted intervals.

The presence in these capsules of an accurate amount of mercurial; the cleanliness of the employment of the remedy in this form; the convenient manner of carrying, keeping and handling the divided and exact doses, all constitute reasons for prescribing the use of mercury in this manner when it is desired for external use, rather than to have it done up in the old way in ointment-boxes or greasy powder-papers.

We put up, in 5-gramme size capsules, both the precipitated oleate of mercury (representing 28 per cent. of mercuric oxide) and mercurial ointment, U. S. P. The contents of these will be found to be uniform in weight as well as of standard strength, and the therapeutic effects obtained from their use can be regulated with the greatest exactness.

In Boxes of One-Half Dozen Each and in Boxes of One Dozen Each.

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PIL. CATHARTIC COMP., "ACTIVE," P. D. & CO.

Purified Aloes.....1 1-8 grains. *Powdered Capsicum.....1-9 grain.*
Gamboge..... 3-16 grain. *Oleum Tiglii.....1-50 grain.*
Podophyllum Resin.....1-8 grain.

This formula is introduced to meet the demands of the profession for a cathartic pill which would embody virtues of the U. S. P. formula and yet be more active. This activity is secured by the introduction of 1-50 grain oleum Tiglii. The general objection which exists to the internal administration of oleum Tiglii is not based upon tenable ground, and arises only from mistaken ideas regarding the drug. The oil is a drastic purgative in doses of half to three drops, but is merely stimulant, cathartic and alterative in doses of 1-60 to 1-20 grain.

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Facts about Empty Capsules

To the superficial observer all makes of Empty Capsules are very nearly alike in appearance and physical properties, but there are several important points to be considered, which bear directly upon their comparative value.

1. **SOLUBILITY.**—An Empty Capsule should be perfectly soluble, should quickly dissolve under the combined action of the warmth and moisture of the stomach, and should require little, if any, digestive action.

   Parke, Davis & Company's Empty Capsules comply with these requirements in every respect.

2. **PLIABILITY.**—Empty Capsules should be pliable, because if brittle they are exceedingly expensive to handle, for the reason that many will be broken in filling—sometimes more broken than used.

   Please note how great a pressure is required to break one of Parke, Davis & Co.'s Empty Capsules.

3. **UNIFORMITY AND EXACTNESS OF SIZE.**—The same numbered Empty Capsules should be exact and uniform in size. The disadvantages of misfit capsules are obvious. The cap sometimes comes off altogether and leaves the powder loose in the box or paper in which it has been placed. At other times, while remaining upon the capsule, it fits so loosely as to permit the powder to sift out. Again, many capsules, after being filled, are broken in the attempt to fit a tight cap over them, and the result is a loss of drug, capsules, time, and patience.

   Please examine carefully Parke, Davis & Co.'s Empty Capsules, and observe how accurately each cap fits, and how uniform in size each number of capsule is.

4. **QUALITY OF THE GELATIN.**—An Empty Capsule should be made only of the finest gelatin obtainable; otherwise it will be nauseous to the taste, brittle, imperfectly soluble, liable to discoloration, and sometimes odoriferous, having a disagreeable "gluey" smell. *It is possible to materially reduce the cost of the manufacture of empty capsules by the employment of the cheaper grades of gelatin*, and the avidity with which unscrupulous manufacturers seize upon such resources as these in their efforts to secure trade during a brisk competition is proverbial. The purchaser should therefore be upon his guard whenever a slight difference in price is urged in behalf of any manufacture.

   Please observe the quality of gelatin used in the manufacture of Parke, Davis & Co.'s Empty Capsules, which is the finest French gelatin procurable. There is no disagreeable smell or obnoxious taste, and the capsule is clear and as nearly transparent as gelatin can be made.

5. **PERMANENCY.**—Capsules should be so made as to keep throughout all seasons. A capsule which is liable to soften during warm weather, and become attached to its fellows, is certainly an expensive one at any price.

   Parke, Davis & Co.'s Empty Capsules are so tempered as to remain intact during the warmest season, but this result is not attained at the expense of solubility.

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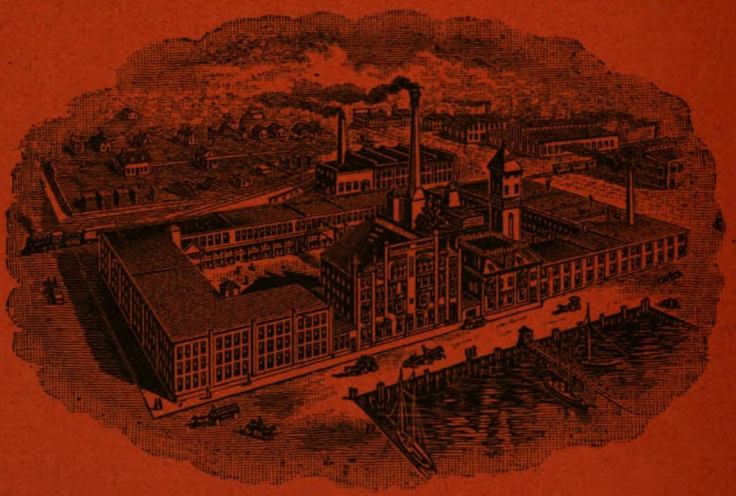

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SECOND YEAR. DETROIT, MICH., OCTOBER, 1895. No. 3

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An Alcoholic Solution of Decomposition Products

Fittingly describes the "Wines" and "Extracts" of Cod-liver Oil upon the market which claim to present the "active principles" of : : :

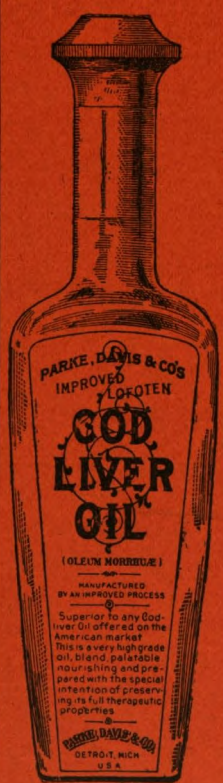
COD = LIVER OIL.

Shall we go on to administer the extractives of Cod-liver Oil,

Cadaveric Alkaloids, of Demonstrated Poisonous Properties,

and discard the really valuable constituents which make up the food? A tuberculous patient can generate a sufficient amount of ptomaine without any assistance from his physician.

REYNOLD W. WILCOX, M.D.,
in *Maryland Medical Journal.*



Improved Lofoten Cod=Liver Oil

(P., D. & Co.)

is simply the oil obtained on the site of the fisheries from the livers of the fish at the time they are taken from the water. The process of manufacture is carefully carried out so that absolute cleanliness and freshness of the material shall be secured and that no decomposition shall take place.

GUARANTEED TO POSSESS EVERY VIRTUE ASCRIBED TO THE OIL BY SCIENCE.

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Nuclein Solution Improved [P. D. & CO.]

Is prepared according to the formula of Victor C. Vaughan, M.D., Ph.D., Professor of Hygiene in the University of Michigan. It increases the number of white blood-corpuscles and stimulates the activity of those organs whose function it is to protect the body against infectious diseases. It has been used with benefit in *initial* cases of tuberculosis, in streptococcus diphtheria, typhoid fever, malaria, membranous tonsillitis, etc.

Contains one per cent. Nucleinic Acid from yeast; of Phosphorus six per cent.

Beware of the so-called Nuclein Solutions which are strongly alcoholic. True Nuclein is insoluble in alcohol.

Clinical reports as to the value of Nuclein (P. D. & Co.) in tubercular diseases, diphtheria, typhoid fever, malaria, etc., together with reprints of papers by Prof. Victor C. Vaughan and Dr. Chas. T. McClintock, promptly mailed upon request.

Special Note! Please do not confound NUCLEIN (P. D. & Co.) with PROTO-NUCLEIN, a proprietary preparation the formula of which is best known to its manufacturers. . . . . .

PARKE, DAVIS & CO.,

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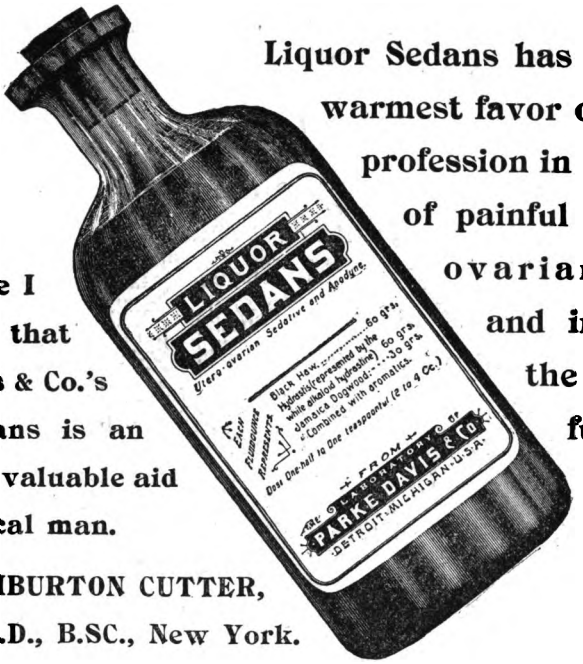
Liquor Sedans.



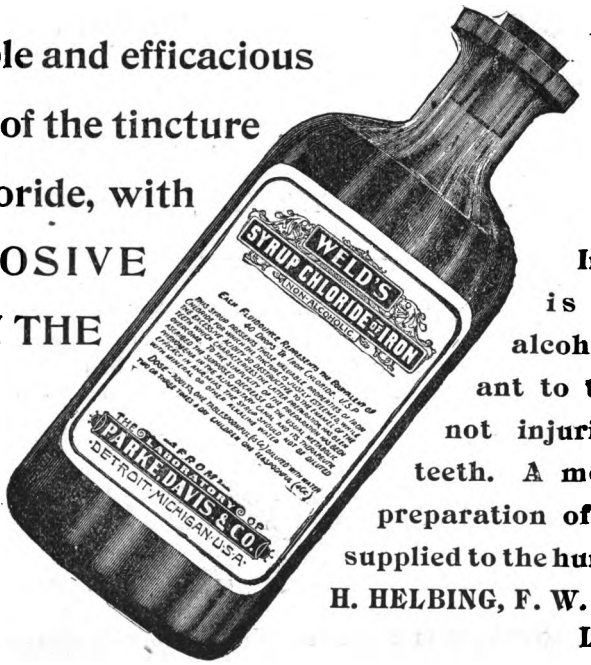
Liquor Sedans has met with the warmest favor of the medical profession in the treatment of painful menstruation, ovarian irritability, and irregularity of the utero-ovarian functions.

—From my personal experience I can testify that Parke, Davis & Co.'s Liquor Sedans is an exceedingly valuable aid to the medical man.

JOHN ASHBURTON CUTTER,
M.D., B.SC., New York.

Syrup Iron Chloride.

A palatable and efficacious preparation of the tincture of ferric chloride, with NO CORROSIVE ACTION ON THE TEETH.



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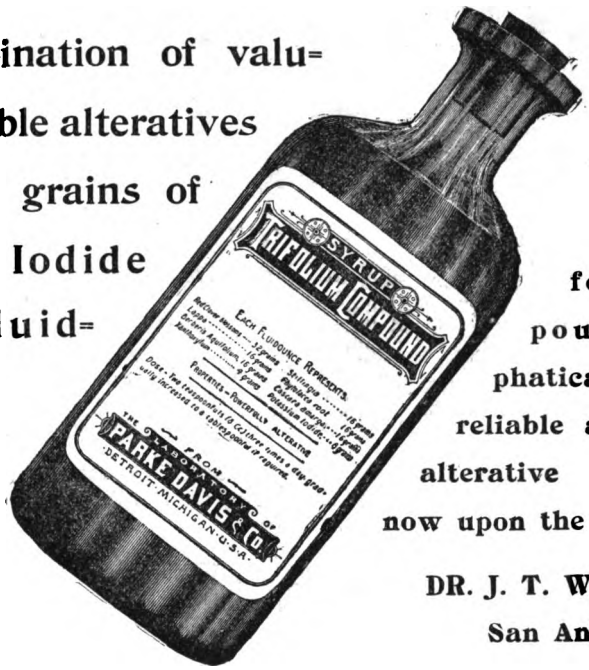
A combination of valuable vegetable alteratives with eight grains of Potassium Iodide to the fluidounce.



—Your Syrup Trifolium Compound is emphatically the most reliable and effective alterative combination now upon the market.

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San Antonio, Texas.

Kola Cordial.

Kola is recommended for its stimulating and sustaining properties. Valuable in all depressed conditions of the muscular and nervous systems. Each fluidounce of Kola Cordial represents 120 grs. of Kola.

—We should bear in mind that besides the caffeine which it contains, Kola possesses nutritive and tonic properties which are carried to the badly irrigated, badly nourished tissues, revivifying the organism.

DR. LEON ERNEST MONNET, Paris.

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Although Pepsin in its various forms will, beyond all question, digest proteids and is therefore to be relied upon in its particular sphere,

Pepsin is of no Value

IN THE DIGESTION OF STARCHY FOODS.

TAKA-DIASTASE

The Diastatic Ferment Par-Excellence
. . . . for the Relief of . . . .

Amylaceous Dyspepsia

(Amylolytic Power, 1 to 1500)

Is capable, under conditions specified by Junck's malt test, of converting fully 1500 times its weight of dry starch into sugar, in three hours. Or, under the same conditions, Taka-Diastase will in ten minutes (and this rapid test should invariably be employed) convert 100 times its weight of dry starch into sugar.

SUPERIOR TO MALT EXTRACT.

1. **TAKA-DIASTASE** will convert 100 times its weight of dry starch. The best malt extract will not convert more than five times its weight under same conditions.
2. **TAKA-DIASTASE** is absolutely permanent. All malt extracts deteriorate with age.
3. **TAKA-DIASTASE** is in powdered form, dose from 1 to 5 grains. Malt extracts contain a preponderance of foreign inert matters, necessitating large doses.
4. **TAKA-DIASTASE** is free from sugar. Malt extracts are heavily loaded with sugar and apt to exaggerate already present pathological conditions.
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6. **TAKA-DIASTASE** is economical, owing to its small dosage. Necessarily large dosage renders malt extracts expensive in comparison.

Correspondence upon this subject respectfully solicited.

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THERAPEUTIC NOTES.

SECOND YEAR. DETROIT, MICH., OCTOBER, 1895. No. 3

Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
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Detroit, Mich., U. S. A.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

Editorial.

A "SYMPOSIUM" ON ANTITOXIN.

The *Boston Medical and Surgical Reporter* for September 12 contains three articles bearing on the clinical use of diphtheria antitoxin. Each author is a physician of recognized weight in his profession, and it may not be uninstructive to quote the respective conclusions.

Dr. William Hallock Park, of New York, states:

Diphtheria antitoxin has a distinct curative effect in diphtheria. The results are better when the injections are used early in the disease and when the diphtheria is uncomplicated with pneumonia or sepsis. The total amount required in the treatment of a case varies from 1000 to 4000 units, Behring's standard, and is determined by the severity and duration of the disease and the weight of the patient.

An injection of 100 to 200 units of antitoxin will give an almost certain immunity from diphtheria for four weeks. If security is desired for a longer period, the injection must be repeated.

Diphtheria antitoxin will not cure all cases of diphtheria, even if given early in the disease. It does not destroy the diphtheria bacilli. It is desirable, therefore, with the antitoxin, to use other treatment, both local and constitutional.

The injection of diphtheria antitoxin with its accompanying horse-serum is attended in a moderate percentage of the cases with disagreeable results, but in very few with any serious ones. No cases have been observed in which the kidneys showed any evidence of being seriously affected. It does not appear to have any deleterious effects on the blood, other than to cause a moderate temporary diminution in the number of red blood-cells, and even this is more than counterbalanced by its lessening the action of the diphtheria poison.

Dr. Charles F. Withington, Roxbury, Mass.:

But while it [antitoxin] has its limitations, and while it has its accidents and ill-effects in certain cases, it seems to me to possess the great preponderance of advantage in the treatment of severe cases; and I believe that the reduction of mortality at any rate far offsets any of these ill-effects which we sometimes see.

Dr. George G. Sears, Boston:

In conclusion I would say that careful observation has changed my position from that of a good deal of skepticism regarding the value of antitoxin, to one of considerable optimism. While it has not fully justified all the claims of its most ardent supporters, since death sometimes occurs even when the injections are made early in the disease, in cases which seem clinically appropriate a marked reduction in the mortality-rate has followed its use. Unfortunate results have occasionally followed, perhaps from some idiosyncrasy on the part of the patient, perhaps from some chemical change or decomposition in a particular specimen; but whatever the cause, in the face of its many advantages such accidents should no more deter us from its use than the occasional deaths from ether should prevent the employment of the latter as an anæsthetic, though it might suggest some limitation to its routine administration. Even if all the cases of broncho-pneumonia or albuminuria observed could be ascribed to it—an impossible task in a disease where such complications are common under any form of treatment—they are more than offset by a reduction of 50 per cent. in the mortality-rate.

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AN ALLEGED COMPARISON OF PEPSINS.

In the *Pharmaceutical Era* Mr. H. W. Snow, of Omaha, publishes a table purporting to summarize the results of a comparative examination of the pepsins on the market. Our Aseptic Pepsin, guaranteed by us to digest 3000 times its weight of egg-albumen, has been weighed in the balance by this would-be expert and found wanting—found to possess an activity not greater than 1875. Of the fifteen pepsins examined, all are declared to fall short of the manufacturers' claims, excepting two, and one of the latter two is the product of Mr. Snow's former employer.

Mr. Snow further declares that our pepsin yields "a very milky solution," "becomes putrid when it is exposed for a short time," "in taste it is unpleasant, and it is also very hygroscopic."

Mr. Snow declined to furnish us a portion of the parcel actually used by him in his test, but graciously informed us that the red finishing number on the label was 443,404. This information we at once placed before F. A. Thompson, Ph.C., of our analytical staff, with instructions to probe the matter to the very bottom, and we give his report *verbatim* as submitted September 20:

No. 443,404, reported in Mr. Snow's letter of August 24, corresponds to manufacturing lot 169,998, bottled April 6, 1895. I secured from your sample file the sample representing lot 169,998, AS WELL AS THREE ONE-OUNCE BOTTLES OF THE SAME PEPSIN FROM YOUR SHIPPING DEPARTMENT, marked 443,404 in red ink.

I submitted these four samples, on three different days, to the test as laid down in the U. S. Pharmacopœia, FOLLOWING EVERY DETAIL IN THE METHOD AS CLOSELY AS POSSIBLE, and found every time that 0.0335 gramme of each of the four samples completely (except a few insoluble flakes allowed by the U. S. P.) dissolved the ten grammes of freshly coagulated and disintegrated egg-albumen in six hours, OR THREE THOUSAND TIMES THEIR OWN WEIGHT, and not 1875 times, as reported in the paper referred to. In carrying out the tests I followed exactly the method in shaking the bottles pursued by Mr. Snow—that is, reversing them twice every fifteen minutes and returning to the water bath.

Mr. Snow's statement that the sample examined by him produced a very milky solution does not accord with the properties of any of the four samples examined by me; on the contrary, THESE SAMPLES DISSOLVE COMPLETELY IN WATER, MAKING A PERFECTLY CLEAR SOLUTION, and NOT MILKY AS CLAIMED.

Mr. Snow's comment on the odor of your pepsin IS EQUALLY UNTRUE, when applied to the four samples from the lot corresponding to the sample examined by him, as all of these have an agreeable odor and taste, which remain with the sample after a long exposure.

Comparing Mr. Snow's results with mine, one is obliged to believe that the sample examined by Mr. Snow did not represent the original contents of the bottle bearing No. 443,404, as it is impossible for two samples of pepsin taken from the same lot, put up the same day, to differ as these do.

F. A. THOMPSON,
Chemist.

Detroit, Mich., Sept. 20, 1895.

The reader will naturally inquire: Who is Mr. Snow? We answer, a former employé of a local manufacturer of non-secret remedies which are designed to replace patent medicines in the hands of the laity—a concern whose methods we have unsparingly exposed. A few years ago he executed some alleged analyses of malt extract and made a misstatement which subsequently required retraction. The young man's latest achievement has been his defense of the unsavory non-secrets when they were denounced on the floor of the American Pharmaceutical Association by Mr. Alpers, of the New Jersey Board of Pharmacy.

A high-minded chemist, properly heedful of his professional dignity, would not have rushed into print with a wholesale aspersion on the reputation of an honorable manufacturing house like our own, without first reporting his results and requesting information. We shall follow this matter further until the highest analytical authority in this land establishes the folly of Mr. Snow's allegations; and meantime we have no hesitation in expressing the opinion that neither his conduct nor his motives will bear close inspection.

GREATLY MISTAKEN.

The companion-journal of THERAPEUTIC NOTES is *Pharmacal Notes*, which, as its name indicates, is designed for circulation among pharmacists. *Pharmacal Notes* is also widely and closely read by a number of medical men.

Its September issue contained on page 65 an editorial on the abuse of tablet triturates. The tenor of that article may be inferred from the following passages:

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Creosote, ammonium carbonate, menthol, camphor, and similar drugs, are hopelessly volatile; and in tablets, only comparatively minute quantities thereof can be exhibited. Calomel and sodium, save in small proportions, afford a most irrational combination. Salol combined with camphor is a monstrosity: one tablet-manufacturer claims $\frac{1}{10}$ grain of camphor in his formula for Salol Compound; the presence of such a proportion would liquefy the tablet! Benzoic acid is equally unfit for this mode of administration.

All of the solid extracts are subject to deterioration from the exposure they suffer in tablet form. . . . .

Phosphorus oxidizes readily and has probably vanished ere the tablet reaches the patient.

As a result of an apparently hasty perusal of this article, Dr. T. Brooks, of Dearborn, Mo., writes us under date of September 16:

In your *Pharmacal Notes*, last issue, I notice you have retraced your former steps in regard to your own preparations, *e. g.* compressed and triturate tablets, declaring them "a glaring nuisance." You state that some of your own preparations are irrational compounds. Now I have used quite a good many of your tablets and will say I am highly pleased with their action. If they are inert, why did you manufacture them? Why not notify the physicians many moons ago?

The Doctor has certainly drawn a violent inference from the article to which he refers, for we emphatically have retraced no steps and have no apologies to offer for our tablets: the latter are absolutely faithful to their labels, true to formula, skillfully manufactured, and possess a degree and a permanence of therapeutic activity *as great as can possibly be imparted to this form of medication.* What our labels claim, our tablets contain when they leave our hands.

As purveyors to the medical profession it is manifestly our duty and function to supply those combinations for which demand is made. We are no court of last resort in matters therapeutic: it is not for us to dictate what the physician shall or shall not use: his own clinical experience and knowledge must be his guide. But as scientific manufacturers we assuredly *have* every right to point out glaring pharmaceutical, chemical, or physical disadvantages inherent in any popular line of medication; and our readers will testify that we have ever spoken our minds freely without regard to the effect our frankness might exert on our pockets.

We still contend that it is not rational to administer volatile, readily deliquescent, or delicate medicaments in tablet form. Phosphorus, creosote, menthol, camphor, should not be so administered: in such cases the coated pill or the empty gelatin envelope is preferable.

So long, however, as the medical profession demand the comprehensive application of the tablet idea in manufacture, including the formulas which we deem injudicious, we shall with a clear conscience supply that demand. Should even those tablets which are least certain to retain their original potency prove therapeutically active, so much the better; while any inertness that may develop with the lapse of time can in no case be charged to imperfect manufacture—an ineradicable defect in the formula is no fault of the chemist.

All the goods we put upon the market—tablets included—are what is claimed for them on the label; and when we have pointed out that a specified formula is liable to deteriorate on keeping, and to become something different from the claims made for it, we have done our duty in the premises: the physician who continues to prescribe it assumes responsibility for the results.

"DISPENSE ONLY UNDER MEDICAL DIRECTION."

In commenting upon the service rendered by the thyreoid treatment of obesity, the *Medical Times and Register* emphasizes the alarming results which may ensue, and the necessity of dispensing this remedy only under medical direction.

It would, therefore, seem fitting for us to state that not only are our Desiccated Thyreoids and Thyreoidin dispensed exclusively on physicians' prescriptions, but, furthermore, every article bearing our label is so dispensed. On our entire list we have not a single preparation advertised or sold directly to the laity. Our pharmaceutical products are marketed through the usual channels of the drug trade, for dispensing on the prescriptions of medical men. Our advertising and our circular literature are read exclusively by druggists and physicians. In no way do we court the favor or invite the patronage of the lay public.

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WORTH PONDERING OVER.

The experience of Dr. F. W. Rose, of Whitesboro, N. Y., as narrated in his letter of September 2, is of a significance which cannot fail to bring conviction home to the mind of any practitioner who may undervalue the need of specifying the desired brand of preparation when prescribing. Dr. Rose reports:

The other day I had occasion, at Gouverneur, N. Y., to prescribe your fluid extract cascara sagrada, and I went with the patient to get his medicine. I said to the druggist: "Do you see whose fluid extract is specified?". He answered: "I have ——'s, which is just as good." I told him he knew better than that, and we went further, only to have our experience repeated. The upshot of the matter was, I sent the prescription 124 miles to John Shehan to be filled, where I knew they had the goods. The patient is getting rapidly well, and he thinks it is only a little less than a miracle that he got the right medicine.

I have made enough reputation out of that one article alone to repay me for all the trouble I have ever taken to see that my patients receive P., D. & Co.'s fluid extracts. This is no flattery: I will swear to it before a notary any time.

COMPLETE ATROPHY OF THE THYROID GLAND.

The September number of the *Denver Medical Times* publishes a paper which was read last June by Prof. W. J. Rothwell, M.D., before the Colorado State Medical Society, reciting the symptoms and successful treatment of a case of advanced myxœdema. There was complete atrophy of the thyroid gland; careful palpation revealed no trace of it. Parke, Davis & Co.'s thyroid extract was prescribed in doses of five grains t. i. d., after meals. Ordinary hygienic directions were given, but no other medicine prescribed, as the writer wished to test the thyroid treatment.

The treatment, prolonged from February 10 to March 10, effected a reduction of 30 pounds in the patient's weight and restored his general condition to the normal. The complete extinction of the thyroid gland will, of course, necessitate a life-long use of the remedy in physiological doses—one grain thrice daily. Professor Rothwell adds with much satisfaction: "It is very encouraging to reflect that while a few years ago nothing was known of the pathology or treatment of this peculiar affection, to-day we are thoroughly familiar with its gross pathology, and its treatment is as certain and satisfactory as any other in the whole domain of therapeutics."

STRYCHNINE AS A MUSCULAR TONIC IN LABOR.

On May 15 Dr. F. H. Russell, of Wilmington, N. C., read before the North Carolina Medical Society an interesting paper on "Clean Midwifery," and in the resulting discussion some striking statements were made with respect to the maximum quantity of strychnine nitrate which should be given to tone up the muscles. The author recommended one-fortieth of a grain.

Dr. Booth had his misgivings about heroic doses of strychnine, and other speakers shared his views.

Dr. Burroughs thought he had used it as freely and in as large doses as any man in the State—he meant nitrate of strychnine. He had had Parke, Davis & Co. make him some tablets of one-sixteenth grain and some containing one-eighth of a grain. He had treated probably several hundred patients with strychnine, giving it twice a day, until he had gotten them up to about one-eighth of a grain twice a day. He got stimulation of heart from it, and had never poisoned a patient. These doses were not given hypodermatically.

Dr. Sykes had observed convulsions to follow one-sixtieth of a grain.

Dr. Kent gives small doses (one-sixtieth to one-twentieth of a grain), save in extreme cases requiring heavy doses.

MORE PALATABLE AND DIGESTIBLE THAN THE EMULSIONS.

Prof. C. S. Chase, B.Sc., M.D., Waterloo, Iowa, Professor of Materia Medica and Therapeutics of the State University of Iowa, states, in a communication addressed to us under date of September 13:

Your Lofoten Cod-liver Oil, all of which was used by the students last year, was a success. The most flattering reports were handed me as to its efficiency. Dr. C. E. Conn's experimentation with the oil upon lower animals he reported to you, and you published it.

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You are at liberty to quote me as saying that it was the consensus of opinion among the students who tested it personally, that it surpassed in all points any of the emulsions so numerous on the market. It proved to be palatable and far more digestible than several of them. This I corroborated in my private practice in several cases.

EUTHYMOL IN DENTAL PRACTICE.

Dr. Geo. H. Mosher, Secretary of the Michigan Board of Dental Examiners, has been testing the merits of our Euthymol in his practice. The following unsolicited report we publish with the Doctor's full permission:

I can earnestly assure you that I value Euthymol very highly, having used it personally and in my practice as a wash for the mouth. I have made considerable use of Listerine and other antiseptic preparations, and I must say that Euthymol suits me best. I freely recommend it to my patients.

I wish also to express my pleasure and satisfaction with the trip through your laboratories on the 20th of June last.

A RELIABLE TEST FOR NUCLEIN SOLUTION.

The distinguishing characteristic of the nucleins chemically is their richness in phosphorus, and a very simple test will demonstrate the utter worthlessness of most of the alleged "nuclein" offered in competition with our solution prepared under Dr. Vaughan's supervision.

Nucleinic acid is insoluble in dilute hydrochloric acid. Add one drop of the latter and a small amount of alcohol to a small quantity of our preparation, and the nucleinic acid will be thrown down in the form of a white flocculent precipitate. Other solutions on the market, similarly treated, will not bear this test.

Dr. Oliver Hughes, of New Haven, Conn., says he obtains great benefit from the use of jambul in diabetes. Its use "allows the patient to go about his daily work with ease and comfort. He once more feels like a human being, and not like an animal condemned to bran-mashes." Dr. Hughes adds that the fluid extract is the best form, and that prepared by Parke, Davis & Co. the most reliable.—*Practical Medicine.*

Practical Therapeutics.

TAKA-DIASTASE.*

BY FERDINAND LASCAR, PH.G., PATHOLOGIST TO DEMILT DISPENSARY, ETC.

In the human system a continued waste takes place which it is necessary to provide for, and to this end man partakes of food which must contain the elements for this purpose. The food needed is both animal and vegetable in nature, the latter forming by far the greater and more important part. It can truly be said that upon the proper digestion of his food, man's health, happiness, and very life depends. Any irregularity or fault in the process of digestion very soon becomes manifest, and dyspepsia, malnutrition and ill-health follow. As the food man partakes of is twofold, so is the process of digestion a twofold one, animal and nitrogenous foods needing an acid, while vegetable, starchy foods need an alkaline process to bring them into a soluble form ready for assimilation. The general idea about faulty digestion is that the stomach performs its duties improperly. While this, in very many instances, is undoubtedly so, the fact is, nevertheless, that in the greater number of cases of impaired digestion improperly performed processes of other organs are at the bottom of the evil in failing to properly convert the starchy food partaken of.

SALIVARY DIGESTION.

The changing of amylaceous food into dextrose and maltose is the beginning of digestion. All will have observed that bread, crackers, or potatoes, not being sweet in themselves, very soon become so when masticated and thoroughly mixed with the saliva in the mouth, and that their taste becomes sweeter the longer this is continued. This sweet taste is due to the conversion of the hydrated starch by the action of the saliva upon it, the saliva containing an enzyme called ptyalin, which, by its presence, splits up the starch into soluble products which I will mention later on; and this splitting-up process of the starchy food even continues after it has left the mouth. Animal foods needing the acids which are found in the

* Reprinted from *Therapeutic Gazette*, July, 1895.

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stomach are digested there, but acids materially interfere with the action of enzymes which cause the conversion of starch, even destroying such action altogether. For this reason it seems practically incorrect to say that the conversion of starch continues after it leaves the mouth; but nature has provided against a too soon interference of acids, and it is now well understood that acid, especially hydrochloric acid, is secreted in the stomach a considerable time after the food has arrived there, and this may be one of the reasons why the converting of starch continues after it has left the mouth.

Since medical science has thoroughly grasped the philosophy of digestion, it has been the aim by artificial means to supply the enzymes which digestion calls for when they do not appear to be present in a sufficient quantity or are secreted in less potent form by the digestive organs. Science has succeeded fairly well in supplying gastric and pancreatic ferments when nature lags behind; but our success has so far been only a very partial one in supplying starch-converting substances, and for this reason a new and seemingly valuable discovery in this direction at once becomes interesting.

THE INSUFFICIENCY OF MALT EXTRACT.

That diastase has an identical action with ptyalin upon starch is a fact long known, and for this reason the diastase contained in malt has been employed for this purpose. Diastase is contained to a lesser or greater extent in the different extracts of malt, and in minute quantities also in fermented malt preparations. In the latter the diastatic action, however, is generally totally destroyed by the acids present. Even in the best extract of malt there is only a limited and variable amount of diastase present; and while the extract of malt will continue to play an important rôle as a dietetic agent, its utility as a starch-converting agent will always remain a limited one. From time to time pure diastase has been offered to the profession, but none has so far proved of a sufficient potency to recommend itself to general use. Great progress in this direction is the discovery of Mr. Takamine, a chemist of no mean ability, who acted as one of the commissioners of Japan at the Cotton Exhibition in New Orleans several years ago. At that time he showed me an extract of malt, as manufactured in Japan, very rich in diastase and nutritive properties, and which I have mentioned in a paper on the diastatic and nutritive properties of malt extracts, published in the December number, 1891, of the *Epitome of Medicine*. In that paper I warned against too great heat in the manufacture of malt extracts, as heat impairs, and even is liable to totally destroy, the diastatic action. The avoiding of all undue heat in preparing diastase may be one of the reasons why the diastase which is now manufactured by Parke, Davis & Co., under Mr. Takamine's discoveries, is so perfect in its action in converting starch into maltose and dextrose. His product is a dry powder similar in appearance to some I received from a reputable German firm years ago, but is vastly superior in potency. Since the receipt of this German preparation I have frequently had occasion to experiment with various diastases, some being named vegetable ptyalin, but in no instance have they come up to the desired standard—all have failed to fill the void felt for an enzyme which will accomplish what the enzyme of saliva in a healthy individual does accomplish.

TAKA-DIASTASE SURPASSES THE CLAIMS MADE FOR IT.

In comparing notes of experiments lately conducted with Taka-Diastase, other available diastases, and different extracts of malt, I find that the claim of the Taka-Diastase that it will convert a hundred times its own weight of starch into a soluble state is well authenticated, for I have succeeded in converting even 50 per cent. more of starch than is claimed for it. Another point in favor of Taka-Diastase above other similar products is the quickness of its action upon starch, for the action is almost instantaneous. To convert one hundred parts of starch into a soluble state by the action of one part of Taka-Diastase, under proper conditions, it takes only four minutes until neither iodine test nor the microscope can detect unconverted starch. The product of converted starch with Mr. Takamine's Taka-Diastase is to a great extent maltose. Compared with the time required by the best extract of malt to

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convert starch, this is certainly an excellent showing, for it took the best malt extract between seven and eight minutes to convert its own weight of starch into a soluble state, while with some other extracts of malt it took fifteen, twenty, and thirty minutes to partially accomplish this end. Tests with Fehling's solution to ascertain in the converted starch products the amount of contained sugar therein were equally favorable to Taka-Diastase.

Since Leuch's discovery of the specific starch-converting property of saliva and its ptyalin, we have lacked an agent of sufficient potency to accomplish what good healthy saliva does, and, for the first time, we find in Taka-Diastase a substitute of undoubted worth, which, even in the presence of a minute quantity of acid, does not cease to be potent.

SPECIALLY VALUABLE IN INFANT-FEEDING.

Taka-Diastase, being a dry powder, tasteless, and of no perceptible odor, can be given in very small bulk, and for this reason I think it will prove itself of value in infant-feeding, where it is desirable to give starch-containing foods, provided said food would easily dissolve and the infant's saliva could be relied upon to perform that function. That the new diastase is destined to become a favorite with the profession I have no doubt, having acquainted myself with its potency in converting starch in a minimum of time into a form ready for absorption by the system, and I think it will be found the very remedy for which we have waited so long.

UNPLEASANT REMEDIES PLEASANTLY ADMINISTERED.

BY PROF. JOHN FEARN, M.D., OAKLAND, CAL.

In every age of the world with which we are acquainted, a large percentage of the remedies used for the relief of the sick have been unpleasant remedies. So much so is this the case that when a man has gone wrong on any line, and submits to the inevitable punishment with a good grace, he is said to take his medicine well. If he objects to suffering the consequences of his own wrong-doing, an outraged public sentiment finds expression in the sentence, "Make him take his medicine."

When a person is sick, the normal tastes are wonderfully perverted, so that things which during health are partaken of with pleasure, at these times become very objectionable; how much more objectionable then are the things which in health are swallowed with a shudder. The tastes of the sick must then be catered to as much as may be possible. There is another consideration with many of our patients: the glands and mucous membrane in the buccal cavity are so spongy that disagreeable remedies, either in powder or fluid form, are retained in these structures, giving rise to prolonged discomfort. To a certain extent this may be obviated by having the mouth well washed after every dose, but this does not entirely cover the case.

My attention was first called to this matter a good while ago, when visiting a patient one night. He was a stranger to me, and while inquiring into his habits the old gentleman informed me he kept his bowels regular by taking fluid extract of cascara sagrada. I said to him: "That is a very bitter remedy." He said: "Not in the way I take it." Always on the lookout for some new therapeutic point, I put the question: "How do you take it?" He replied: "I buy gelatin capsules, fill them with the extract, and take it in that way; of course they must be filled as needed, and filled without pouring the medicine on the outside." Here was food for thought.

Soon after this I was in council with a physician—the patient was the physician's wife. I felt sure that *Leptandra virginica* was the remedy specifically indicated, and I prescribed that remedy. The physician at once spoke up and said: "My wife has been sick so long and taken so much medicine that she has become wonderfully sensitive to bitter or pungent remedies, and I know she cannot take that remedy." I said: "Excuse me, but she can." "Well," said he, "with all deference to you, I know she cannot." I said: "Can your wife swallow a capsule?" "Oh, yes," was the reply. "Well, then," said I, "fill your capsule with leptandra and give as directed."

This was a new light to the doctor. It was done, and at my next visit the condition of the patient was much improved by the lep-

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tandra. Some time after this, with the same patient, I saw an indication for another very pungent remedy, and advised its use. The doctor at once met me with the objection: "So sensitive is my wife that the smell and taste of the remedy would be serious." I said: "Do you remember our experience with leptandra?" "Why, yes," said he. "Well, then," said I, "go and do likewise with this." He did so, with the same happy results. Among the more objectionable remedies to this poor sufferer were leptandra, hyoscyamus, chloroform, chloral hydrate, etc. All these remedies and many others she can now take with impunity. She gets all the therapeutic advantage without offending the organs of either taste or smell. To many readers of the *Times* there will be nothing new in this, but some who have long used capsules as a vehicle for unpleasant powders will perhaps learn for the first time that they are equally efficient for the use of bitter liquids.

Of course you must get the best capsules. I have tried capsules of different makes. Many have disappointed me. The capsules that have given me the best satisfaction and which, in fact, have never disappointed me, are those supplied to the trade by Messrs. Parke, Davis & Co., of Detroit, Mich.

In conclusion, remedies given in this way reach the stomach in a very concentrated condition, and their local action may not be good in this way. To obviate this, let the patient drink water, hot or cold, as may be best, immediately after swallowing the capsule. In this way we get the needed diffusion of the drug, and all goes well.—*Chicago Medical Times.*

CLINICAL EXPERIENCE WITH NUCLEIN.

BY R. D. JOHNSON, M.D., SAN FRANCISCO, CAL.

I have now been using Nuclein for sixty days in three different cases—syphilitic anæmia, tubercular glands of neck, malarial intoxication with resulting anæmia.

Case 1.—The rigorous anti-syphilitic treatment during the past eighteen months, *plus* the syphilis, had rendered the patient almost malignantly anæmic. The various stimulating tonics proved futile. Having thoroughly acquainted myself with the literature on Nuclein, I obtained a supply through Stern Bros., chemists, and followed in every detail the method of administration directed by Professor Vaughan, with especial reference to strict asepsis in the injections. At the end of sixty days my patient has entirely regained his normal condition: sleeps well, has gained some twenty pounds, and declares he "never felt better in his life!"

Case 2.—The glands of the neck were so profoundly affected as to render surgical interference impossible. My associate, Dr. Grimm, was struck with the great amount of destruction manifested. I refrain from enumerating the familiar collateral symptoms.

As a result of 100 injections, the appetite has returned to normal; 14 pounds have been added to the weight; the cachexia has disappeared; glandular lesions are vanishing. In fact, the sum total of present conditions is a new individual.

Case 3.—Mrs. ——, of Louisiana: enlarged spleen, malarial cachexia, general anæmia, basic heart murmur, poor appetite, and digestive disturbances. Iron, digitalis, strychnine, malt preparations, were tried without avail. I began using Nuclein, and after twenty injections her cachexia has almost disappeared; appetite has returned, with a gain of seven pounds in flesh.

These three cases have impressed me very deeply with a sense of the boon humanity has received in Nuclein, and no commendation can be too high for its author, Professor Vaughan. I hope the manufacturers will continue to supply such a prize.

September 4, 1895.

NON-SURGICAL TREATMENT OF GALL-STONES.

In June, 1895, John A. Ouchterlony, A.M., M.D., published in the *Medical Age* a highly interesting article on Chole-lithiasis, from which the following passages anent treatment are borrowed:

The patient's food should be plain but nourishing. Highly seasoned viands, malt liquors, fats, sweets and rich soups must be interdicted. He should eat moderately, at short intervals—not less than three meals a day. He should take active exercise, by walking; all other exercise is inferior to this. So long as any calculi remain in the gall-bladder he should not indulge in violent exertions, such as running, wrestling, etc. His daily life must be regulated with the view of establishing rapid and perfect tissue change, perfect combustion and complete and speedy elimination.

Dr. Buckler in his paper published in the *Medical Age* suggests that any remedy capable of preventing the formation of gall-stones must be a highly

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oxygenated compound, and further states that the difficulty of dissolving cholesterin by any other substance than ether or chloroform grows out of the fact that cholesterin contains a very small amount of oxygen, from 1½ to 2 per cent., which is less than that of almost any other substance. He proposed succinic acid and peroxide of iron on account of the large amount of oxygen contained in both. I have used this preparation of succinate of peroxide of iron, AND IN ALMOST EVERY CASE WITH COMPLETE SUCCESS. It should be taken for six months continuously, at least.*

The paper by Dr. T. H. Buckler (*Medical Age*, April 10, 1894), before referred to, advises the use of hydrated succinate of the peroxide of iron as a solvent of gall-stones and cholesteric fat; and adds:

This preparation contains more nascent appropriable oxygen than any other known therapeutic agent. Of all the ferruginous articles it is one of the very best for malarious cachexia, or in any other conditions where the blood-globules diminish or need rehabilitation.—Nitric acid contains, of course, a great deal more oxygen, which is, however, too easily taken up where it is not wanted; whereas the oxygen in succinate of iron is only appropriated when required, and if not needed is not appropriated at all. And for this reason, in all those cases of liver trouble where nitric and hydrochloric acid are usually prescribed, the succinate of iron will, it is believed, be found on trial far more efficacious.

I have for thirty-five years used hydrated succinate of the peroxide of iron, held in suspension in impalpable form. It is permanent when carefully manipulated. Considering the activity of oxygen, it is easy to see what this compound can do with cholesterin and cholesteric fat containing only 1½ per cent. of that omnivorous agent.

Dr. Buckler also employs chloroform for the immediate relief of impacted gall-stone, the action of iron succinate being too slow; but for the purpose of overcoming the cholesteric diathesis, and to prevent recurrence of these concretions, the iron succinate alone is an available medicament. The strength of the author's convictions on the subject may be imagined from the following passage:

The science of general medicine properly administered, and taking into account the frailties of human nature, is as certain as divinity, more so than law; and of all the certainties of medicine there is nothing more absolutely sure than that chloroform will in every instance dissolve calculi in the gall-bladder.

It is equally certain, as shown by cases cited by Dr. Buckler, that hydrated succinate of the peroxide of iron will prevent the further formation of biliary calculi, and eventually overcome the cholesteric diathesis.

Copies of the journals containing the articles referred to will be cheerfully sent on request.

*Messrs. Parke, Davis & Co. now prepare an elixir of the hydrated succinate of peroxide of iron, the dose of which is one drachm three times daily, after each meal.—ED. *Age*.

CASCARA SAGRADA IN RHEUMATISM.

BY J. W. HUNTOON, M.D.

I feel prompted to confirm and emphasize the opinions of Dr. Goodwin, of Louisville: I inherited rheumatism, and used every remedy known for it, from colchicum to propylamine and from nitrate of potash up through the salicylates to oil of wintergreen. When taking cascara sagrada for constipation, I discovered casually that it was worth far more than all other remedies for rheumatism; and a large experience of five years has abundantly proved to me that with cascara, oil of wintergreen, and a little bryonia in some cases, we have a satisfactory treatment for all forms of rheumatism. It will certainly prevent untold suffering and prolong many lives.

NUCLEIN IN ACUTE PNEUMONIA.

BY DR. WM. C. STEVENS, HOSPITAL INTERNE, COLLEGE OF MEDICINE AND SURGERY, DETROIT.

Saturday, October 20, 1894, called to see Mr. B——, who was suffering from pneumonia of the lower lobe of the left lung, in the first stage; pulse 110; temperature 104°.

On the Wednesday following, the upper lobe became involved; about the same time the right lung was attacked with bronchitis; temperature 105°; pulse 120; respiration 30. The succeeding Friday the patient was delirious and evidently in a dangerous condition; the cough was almost constant; expectoration frothy and viscid, *not rusty;* consolidation of left lung complete; pulse feeble and 120; temperature 105°. I now regarded the case as hopeless. The left lung had been consolidated eight days, and the right had become involved, in the larger bronchi at least, and there were no apparent signs of resolution.

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At my request, Messrs. Parke, Davis & Company placed at my service a liberal supply of Vaughan's *Nuclein*, and I commenced its use the following day (Saturday) by a dose of fifteen minims subcutaneously at 9 A.M., and repeated at 5.30 P.M.

Sunday morning there was a marked improvement in the bronchitis (of the right lung); expectoration less viscid and more profuse. Gave one drachm Nuclein hypodermatically morning and evening. Evening temperature normal; pulse 100; mind clear. No marked change in left lung.

Monday I found the patient sitting up, and he remarked: "I have no more use for you." On examination I found the respiratory movements had returned sufficiently strong to be readily noticed; the bronchitis of the right lung had disappeared, and the left was clearing. Tuesday the patient was up, sitting by the stove; pulse 80; temperature normal. Wednesday gave the last dose of Nuclein. Thursday, patient dressed and walking about. Saturday I pronounced him well, and discontinued my visits.

It is interesting to note the Nuclein was commenced at a time when there was the most danger—temperature 105°, pulse 130, and delirium. The improvement was simultaneous with the use of the medicament!

The researches of Metschnikoff, Kossel and others prove that the polynuclear white corpuscles are the defenders of the system against the invasion of disease germs, and their action seems to be explained by the fact, set forth by Doctors Vaughan and McClintock, that the germicidal substance in the blood is the nuclein found in the white corpuscles. With these facts clearly established we can understand how the consolidated lung so quickly cleared up.

Surprisingly Soluble.—Our compressed tablets of Quinine Sulphate disintegrate and liberate the medicament with surprising rapidity. A test may be easily made by dropping two or three into a glass of water; they break up in a twinkling. Not a few manufacturers, realizing that quinine sulphate is comparatively insoluble in water, use enough sulphuric acid to transform the sulphate into the more soluble bisulphate. This we consider a breach of that fidelity which the manufacturer owes to his label.

THE MANIFOLD USES OF A FINE PREPARATION.

EUTHYMOL—ITS FORMULA AND APPLICATIONS.

When the Irish lad wrote home that America was a blessed land and he had meat twice a day, his employer inquired: "Why don't you tell the truth and say you have meat at every meal?" "Bliss you, sor," was the reply, "they wouldn't belave it—they'd think I was lyin'."

This response applies, in a measure, to the varied usefulness of our Euthymol, formerly known as Eucalyptus and Thymol Antiseptic. A simple and sober enumeration of its manifold applications would read like a patent-medicine advertisement. Yet our Euthymol is a strictly ethical preparation, *never* advertised to the laity, and its published formula will explain to any experienced pharmacist why it has such a wide range of utility.

Each fluidounce contains:

Oil eucalyptus, $\frac{5}{8}$ minim.
Oil gaultheria, $\frac{9}{25}$ minim.
Fl. ext. wild indigo, $1\frac{1}{2}$ minims.
Boric acid, $10\frac{5}{16}$ grains.
Menthol, $\frac{5}{64}$ grain.
Thymol, $\frac{11}{25}$ grain.

ADMINISTRATION.

Euthymol is adapted to any of the various methods of administration—internal, external, hypodermatic, as a douche, by spraying, atomization, or otherwise—in genito-urinary diseases; respiratory diseases; diseases of the digestive system; eye and ear diseases; malarial, typhoid or eruptive fevers; in gynæcology and obstetrics; skin diseases; for vaginal or urethral injections; as an application for venereal and other ulcerations; as a gargle in diphtheria and other throat diseases; for the purification of sloughing tissues; externally in variola and erysipelas; diseases of the scalp; dysentery; gastritis; dyspepsia and gastro-intestinal disorders accompanied by fermentation and flatulence; diarrhœa, etc.

ITS NATURE.

This preparation is non-poisonous, non-irritant, and non-escharotic; does not soil the clothes; is a capital deodorant for foul-smelling discharges, and an excellent dressing for wounds.

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WHAT IT WILL DO—HOW TO USE IT.

For Burns and Scalds: Surprising results have followed the application of equal parts of Euthymol and glycerin. We have no hesitation in recommending it. Some prefer raw linseed oil to the glycerin, but as yet they are in the minority.

For Dandruff: Cleanse the scalp well with either Castile soap and water, or bicarbonate of soda and water. Then apply Euthymol and rub briskly.

A Good Hair Tonic: A correspondent urges us to publish the following:

℞ Tincture cantharides, ½ ounce.
Fl. ext. jaborandi (P., D. & Co.), 1½ ounces.
Euthymol, 14 ounces.
Mix.

As a Tooth and Mouth Wash: A few drops of Euthymol in half a cup of warm water is a luxury in the morning, so agreeable is the sense of cleanliness which it leaves in the mouth. Where a saponaceous preparation is desired, a pleasant and efficient mixture results from the addition of boiling water to shaved Castile soap, in the proportion of about a pint to 1½ ounces, then mixing when cool with an equal volume of Euthymol.

For Offensive Odor of Breath: This is the most annoying and distressing of the minor ailments—sometimes, also, the most stubborn. Add a teaspoonful of Euthymol to half a tumblerful of water, and gargle thoroughly. Indigestion is the chief cause of foul breath; in such cases take internally doses of 20 to 30 drops in a little water.

For Fever-sore Mouth: One-quarter to one-half teaspoonful has repeatedly cured this distressing condition. In some cases the mucous lining was broken, swollen, and very sore, but Euthymol gave quick relief.

In treating the mouth-troubles of children, we consider the old-time remedy of borax and honey inferior to Euthymol and honey.

For Insect Bites and Stings: Euthymol affords an efficient application. We have apparently earned the undying gratitude of the traveling community, for we have numerous reports on the service rendered by Euthymol in both healing and preventing bedbug-bites. A prominent physician of Wyoming has perfect success in cases of ivy and weed poisoning, freely bathing the parts affected.

INTERNAL APPLICATIONS.

For the Diarrhœa of Children: Euthymol has yielded the best results in the following combination:

℞ Euthymol, 2 drachms.
Bismuth subnit., 1 drachm.
Cinnamon-water, q. s. ad 2 ounces.
M. Sig.: One teaspoonful as needed.

In Typhoid Fever: In Ontario an increasing number of physicians use Euthymol as an internal antiseptic; of a number, calomel and Euthymol form the sole treatment, and they speak in glowing terms of the results.

At least two physicians of a Pennsylvania city give the following in typhoid fever:

℞ Zinc sulphocarbolate, 1 drachm.
Euthymol, 1 ounce.
Elix. lactated pepsin (P., D. & Co.), 3 ounces.
M. Sig.: Teaspoonful every two to four hours.

The first two are excellent intestinal antiseptics, while the pepsin does the work of the impaired peptic glands and assists in digestion of the food.

PERSONAL EXPERIENCE WITH IMPROVED LOFOTEN COD-LIVER OIL.

BY NEWTON J. WEDGWOOD, M.D., LEWISTON, ME.

[The following communication, addressed, without solicitation, to our representative in Maine, Dr. D. B. Myshrall, requires no comment:]

When I received the bottle of Lofoten Oil, I was trying to get well enough to undertake a trip to California for the purpose of losing some of my rheumatism and gaining a little strength. I was doing about one-fourth of my business, and saying No to three-fourths. I had taken clear cod-liver oil for rheumatism, but without any benefit.

After reading the history of Lofoten Oil, how and where it is manufactured, and having used Parke, Davis & Co.'s preparations for twenty-five years in my practice, I concluded to take the bottle myself.

Either knee was then as large as both should be, and very painful. My shoulder-, elbow- and finger-joints were very much enlarged and partially anchylosed. I began with a teaspoonful of the oil in milk an hour and a half after each meal. In three days I

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increased the dose to one dessertspoonful. I never take or prescribe cod-liver oil immediately after eating: I deem it better to wait for one to two hours to give the food a chance to get out of the stomach.

When I had finished the first bottle I found myself free from the rheumatic pains which kept me awake nights. To make a long story short, I have taken eight bottles of Lofoten Oil, and shall continue. I have no more rheumatism. I have gained one pound of flesh a week for the past eight weeks. I am very much stronger and my joints are of normal size and not painful. I am attending to all my practice, and have not felt so young in ten years.

Five weeks ago I was called to see a young married man, 28 years old, who was very emaciated, having lost 35 pounds in ten weeks: hectic flush, night sweats, diarrhœa, and so much pain in left side that he was obliged to employ oft-repeated opiates. Examination showed a cavity in the middle lobe of left lung. I at once prescribed Lofoten with some other remedies demanded by his symptoms. In five weeks of the Lofoten treatment he gained six pounds, and has now no night sweats, no diarrhœa, and no pain. The lung is actually in very much better condition. Of course, I don't expect this man to get entirely well, but he is stronger and enjoying himself.

Had I gone to California and received in six months as much benefit as I derived in eight weeks from Parke, Davis & Co.'s Lofoten Oil, I should never have dared to return to Maine to live.

Are You Guilty?—The medical man is positively helpless without pure drugs. To comprehend a pathological condition, to recognize the remedy, is not enough. He must see that the chosen drug actually *performs* the work assigned to it, and this it will not do unless it is a pure and active preparation. The doctor *must* look out for the quality of his drugs. There is no doubt whatever that the annual death rate from disease could be greatly decreased by proper attention on the part of the physician to this very essential point. He *must* recognize that poor drugs exercise as much influence as "the hand of Providence" in filling up our cemeteries.—*Brief.*

IMPROVED LOFOTEN COD-LIVER OIL AS A CORRECTIVE OF CONSTIPATION.

BY L. B. POWELL, M.D., STOCKTON, KANSAS.

I have freely prescribed the Lofoten Cod-liver Oil as a nutrient in cases of general debility, especially for delicate women. Many of these cases, as is well known, are seriously troubled with habitual constipation. To my surprise and delight, I early discovered that the constipation in all cases was greatly relieved, and in many radically cured, by the continued use of the Improved Lofoten Cod-liver Oil. In prescribing the oil I simply increase the dose until its laxative effect on the bowels is obtained, thus continuing until normal peristalsis is permanently established.

Without pretending to explain the pathological condition of the viscera and secretions or the therapeutic action of the oil, I will simply state that in this class of cases habitual constipation is referable to debility of the viscera, and from observation I have concluded that cod-liver oil, like many fixed oils, exerts a laxative action on the bowels, and when given in quantities sufficient to prevent the juices of the stomach from entirely changing its nature a sufficient quantity is appropriated by the intestines to properly nourish and strengthen them, restoring normal peristalsis. In my opinion Lofoten Cod-liver Oil is a specific for habitual constipation in the class of cases herein described.

THE CAUSES AND PREVENTION OF PUERPERAL SEPSIS.*

BY DR. WM. E. GROUND, WEST SUPERIOR, WIS.

A physician of this age who attends a case of confinement with less preparation and care than he would bestow upon a capital operation should be held culpable in case complications of a septic nature arise. If time permits, have the patient take a full hot bath. Empty the rectum and bladder, the former by enema. The robe of the patient and the bedding should be absolutely clean. The surgeon should then render his arms and hands aseptic, paying special attention to the subungual spaces. Ethereal soap and hot

*Extract from paper published in the "Transactions of the Wisconsin State Medical Society."

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water should be used freely with a stiff clean brush. Here it may be necessary to remind you of the danger lurking in questionable soaps and dirty nail-brushes. Nail-brushes should be kept in an antiseptic solution when not in use. I have used Johnston's Ethereal Antiseptic Soap, made by Parke, Davis & Co., with great satisfaction. The external genitals of the mother should be treated in much the same manner. After the scrubbing process has been gone through with, the surgeon's hands and the maternal parts should be rinsed in a solution of creolin. Aseptic towels should be pinned around the thighs and over the mons. The patient is now ready for an internal examination, which should be repeated as seldom as possible. It is good practice to disinfect the hands each time the maternal parts are touched, and to keep a towel wrung from a creolin solution against the external genitals constantly. Should any accident occur to infect the field of operation, disinfect as from the first, always keeping in mind surgical cleanliness. After delivery, the nurse should be directed not to touch the mother, either to change dressing or to draw the urine, without first scrubbing the nails and the hands thoroughly.

AN OBSTINATE CASE OF SYPHILITIC ERYTHEMA.

BY JAMES BRADLEY, M.D., TURNER, ILL.

Never have I seen greater satisfaction to result from any remedy or combination of remedies, than from Parke, Davis & Co.'s Syrup Trifolium Compound. I first employed this product in a case of rash, "syphilitic erythema," which covered the face, scalp, and neck, and which a visit to Hot Springs, as well as treatment by many physicians, had failed to relieve. The patient, a lady of 30, has now nearly finished the second bottle of the Trifolium Compound. The parts affected are nearly free from rash; the skin is assuming a healthy, normal appearance; and her joy is equaled only by the elation of her physician. I have used the remedy in other cases with like good results, but no other case had so stubbornly withstood every previous treatment.

[Since writing the foregoing—March 4th last—Dr. Turner reports further that there has been no recurrence of the erythema: the general strength and health of the patient have been strikingly improved.—ED. NOTES.]

LAMIUM ALBUM—A NEW HÆMOSTATIC.

Lamium album is a rather coarse, hairy perennial, of very extensive distribution in the Old World, and of recent introduction to North America but as yet sparingly naturalized. Florain called attention to the fact that the blossoms were a hæmostatic of the first order. The remedy is said to have been efficacious in cases of bronchial hæmorrhage, blood-coughing, and uterine hæmorrhage, where the usual remedies—such as ergotin, tannic acid, and the like—had been used without success. In metrorrhagia the syrupy extract of the blossoms is used.

The use of the tincture in the following combination is advised:

℞ Tinct. flor. lamii alb., 10 parts.
Syrup sacchari, 5 parts.
Aquæ dest., 25 parts.

A half-teaspoonful or a "coffeespoonful" every half-hour until the internal bleeding ceases, then a tablespoonful every four hours until all the symptoms have disappeared.

Parke, Davis & Co. will take great pleasure in furnishing further information regarding this valuable remedy.—*Medical Progress.*

ANTISEPSIS AND ANTI-OPIUM.

BY ARTHUR DE VOE, M.D., SEATTLE, WASH.

The remarkable triumphs of the Woodbridge treatment in aborting the course of typhoid fever, are full of food for thought. This is a success which has been deemed impossible of achievement. The physician of twenty years ago was sure that typhoid fever must run its tedious course, often to end in death. But now comes Dr. John Eliot Woodbridge, who cures all his patients and aborts the course of the disease. And this is all done by a strictly rational and radically antiseptic course of treatment. There are no palliatives, no anodynes, no opiates. All is consistent, antiseptic, and scientific. This seems to me the most glorious and unequivocal stroke of Galenic genius which modern

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medicine has presented to us—if we accept Dr. Woodbridge's report as it stands. My own verifications have already been sufficient to give me enthusiasm on the subject.

Says good old Dr. Watson: "There is one point in the treatment of fever, of exceeding importance and of some nicety: I mean the use of opiates. If they are given inopportunely, they are apt to puzzle and perplex the case. You do not know how much of the disposition to coma is owing to the disease, and how much is the consequence of the remedy. Again, you may easily augment the natural tendency to coma, and lull your patient into a fatal stupor. But when judiciously administered, opium will often save a patient who would inevitably sink without it." If we intelligently seek intestinal antisepsis, then good-bye opium. The Woodbridge triumph suggests that galenicals may be more successfully relied on for the cure of appendicitis than the modern surgeon is willing to believe.

A NOVEL METHOD OF ASSISTING UTERINE INERTIA.

BY FRANCIS PERCIVAL COWAN, M.D., C.M., TORONTO, ONT.

I wish to place before the profession a singular and unlooked-for circumstance. It is sometimes strange how one discovers the different uses (not otherwise mentioned) of medicinal preparations, if only possessed of observant faculties; but when one unexpectedly *stumbles* upon something useful and practical, he is apt to become reticent and await with pleasure, patience and expectancy the further outcome of investigation. Such were my feelings when I found by repeated experiments that Glycerin Suppositories are of more value than merely as agents for the cleansing of the rectum; in fact, I may say they are of greater value to the obstetrician in assisting prolonged cases of labor, due either to inertia or to the nervous temperament of the mother whereby she becomes unable to assist herself.

Possessed of a somewhat extensive midwifery practice, and having by repeated experiences learned the advisability of having the bowels thoroughly well cleansed, for the comfort of both patient and accoucheur, it has been my custom to carry a large bottle of Parke, Davis & Company's glycerin suppositories. One day I was called in a hurry to attend a young woman with her first-born. Not having been previously engaged for the case, I found upon my arrival that the necessary preparations had been overlooked. After the usual cautions I proceeded to examine, and found the os uteri well dilated, membranes unruptured, parts small, and pains of a very weak nature with long intervals between. Upon inquiry I elicited the fact that she had then been in labor about twelve hours, but it had not been considered necessary to send for a physician, the pains being so very weak. Thinking I had a long and tedious case before me, I adopted my usual routine practice of placing a glycerin suppository in the rectum. It had not been long *in situ* when my patient implored me to remove the "horrid thing," as it caused very severe pain. I assured her, however, that the suffering thus induced would cease as soon as the bowels moved. Presently, and much to my surprise, I discovered the pains were those of labor, the intervals being quickly shortened.

After eight or ten strong pains I again examined and found little or no progress of the head; and at the persistent and repeated requests of my patient I removed the suppository—that is, what remained of it. Immediately the pains ceased and the intervals again became lengthened. After waiting for an hour or more, it suddenly occurred to me the glycerin suppository previously placed must have acted otherwise than expected—that in fact it might have stimulated the uterus to activity. Anxious to determine if such were the fact, I introduced a second suppository in the rectum, assuring the woman that this time it must remain. As a result, I was soon rewarded by increased uterine contractions with hard labor pains. Then I resolved to learn something new—I resorted to frequent examinations, taking the time between the pains. Gradually but quickly I noticed the advance of the head, and when it was well down upon the perineum, the latter being very rigid, I placed the patient upon her left side in all readiness for delivery. Supporting the perineum, the head was shortly born, but at the same moment the remaining undissolved portion of the glycerin suppository "popped"

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out. Needless to say, I was amused as well as gratified by the novel experience and use of the suppository.

Before making known the above, I experimented upon twelve cases, the notes of which I have in my possession, and in all these I conclusively proved to my own satisfaction the efficacy of glycerin suppositories in such cases, and now would not feel at all armed without them.*—*Medical Age.*

A CORRECTIVE FOR VICIOUS TABLE HABITS AND RESULTING CONSTIPATION.†

The new remedy, Taka-Diastase, which has been heralded as of especial value in those forms of indigestion resultant from abuse of amylotic foods, has unexpectedly developed a newer and more valuable power, viz., of correcting impaired functional activity arising from indiscretions of the table. Its use, within limits, insures within the intestinal canal that digestion which should be the concomitant of perfect health and habits. Thus it promises to be one of the most active remedies for those forms of constipation that result from vicious table habits.

It is an error to suppose that the greater part of digestion goes on within the stomach; the province of this organ is chiefly preparatory. Preparation having been made for action by the juices of the duodenum, the food passes the pyloric orifice, perhaps only to be disappointed with the results that accrue. An imperfectly digested, fermenting mass next obtains, that may remain stationary or latent, or be crowded on into the lesser intestine, there to be relieved of the greater portion of its fluids, and then become a focus of disturbance as an impacted, semi-dry, fermenting mass, with all the unfortunate sequelæ of absorption into the circulation of poisonous gases and ptomaine toxicity that are thus developed. In such instances Taka-Diastase takes up the work which has been accomplished but imperfectly in the duodenum, and by stimulating secretion and supplying its own fermentative energy accomplishes an act of superdigestion—it completes that which should have taken place elsewhere. This superdigestion reduces the nourishment to proper consistency without external aid, assures assimilation, and finally provokes peristalsis whereby the now fæcal mass is forced onward to an extra-intestinal existence; thus the condition of constipation that would otherwise have accrued is overcome, and the result attained is physiological rather than artificial.

As already stated, Taka-Diastase has exhibited remarkable results in this connection. In one instance a lady patient whose constipation was further complicated by dislocated kidneys, and who for three years had been unable to pass a single twenty-four hours without resort to an aperient, has secured perfect relief through Taka-Diastase. Another in like condition, and a sufferer for years from hæmorrhoids, and whose constipation was even more persistent, secured such relief as she never before had been able to attain. If space permitted, we might refer to half a score of business men, more or less sedentary in habits, who have found in Taka-Diastase a remedy that renders comfortable lives hitherto considered only tolerable at best.

Certain errors have been promulgated regarding this new ferment: one, that it is inactive in the presence of acids; and another, that it is destroyed by the presence of an alkali; consequently that it must be administered at a time when the reaction of the stomach is neutral.

A greater error could hardly have been conceived, and it is based upon the theory that the chemistry of the test tube and that of the stomach must necessarily be identical. The chemist declares that an alkali must always neutralize an acid, and cites the well known chemical corollary regarding the commingling of these two agents; but his theories are entirely upset by the fact that while artificial gastric juice in the test tube treated with bicarbonate of sodium is wholly neutralized, this alkali in the stomach, on the contrary, stimulates the flow of normal gastric juice and increases gastric activity; the same is true also of sodium chloride. Neither of these alkalies interferes with the action of Taka-Diastase, and the activity of the latter

*Dr. Cowan also calls our attention to notes relative to this same subject appearing in the *Medical Annual* (England) and *International Medical Annual* (New York) for 1895, page 351.—Ed. *Age.*

†Editorial in *Medical Age.*

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appears to be enhanced by the ingestion of fluids rich in malic acid. It has long been supposed, too, though without a shadow of authority, that digestion beyond the pylorus was the antithesis of that in the stomach, and consequently alkaline. As has been before noted in these columns, however, the normal digestive process within the duodenum is absolutely and unmistakably acid; the normal secretion of the intestine is the same; and while there will be times, even in a state of health, when the intestinal tract will perhaps be practically neutral, it is positively never alkaline except under conditions that are foreign to well-being and contrary to the purposes of the economy.

Taka-Diastase, if administered prior to the ingestion of food, is never so satisfactory as when the stomach has first been stimulated with a moderate amount of fluid followed by more or less solid nourishment. In the constipation of dyspeptics and those of sedentary habits this new medicament gives abundant evidence of being able to accomplish more with less tax upon functional activity than any agent hitherto known.

LAVAGE IN THE TREATMENT OF CHRONIC GASTRIC CATARRH.*

BY S. JOSEPH, M.D., ST. LOUIS, MO.

Lavage not only removes the contents of the disordered organ, thereby cleansing the gastric mucous membrane, but also exercises beneficial influences as follows:

1. Stimulates the gastric glands in cases of chronic gastric catarrh, especially in those instances which are associated with excessive secretion of mucus.

2. Strengthens the enfeebled gastric muscular fibres in cases of insufficiency or atony.

3. Increases peristaltic action.

4. With the improvement in the tone of the walls of the stomach, associated intestinal disorders such as constipation may also be overcome.

Lavage should ordinarily be performed once daily (preferably before the first meal in the morning) for one or two weeks, once every second day for two or three weeks, twice each week for several weeks, once each week for several weeks, etc., thus gradually withdrawing the operation as the patient improves.

To prevent fermentation and protect the mucous membrane of the stomach from undue irritation, I use:

Carbolic acid, 40 minims.
Bismuth subnitrate, 3 drachms.
Peppermint-water, to make 4 ounces.

M. S.: Shake well. Teaspoonful in a wineglass of water before meals.

The above prescription is continued for probably several months, then gradually withdrawn as the stomach regains its digestive power and as fermentation ceases. A dose of bicarbonate of sodium may also be given occasionally.

After the first week I administer as a stomachic tonic:

Tinct. nux vomica, 2 drachms.
Tinct. capsicum, 15 minims.
Tinct. gentian comp., to make 2 ounces.

M. Sig. Teaspoonful in water three times daily, after meals.

Constipation may also need attention, and after somewhat free purgation in the beginning of the treatment, the following formula will be found highly efficient in regulating the bowels:

Fl. ext. cascara sagrada, 2 ounces.
Syr. hypophosphites comp., 4 ounces.

M. S.: Teaspoonful thrice daily.

Or, what I like better is a tablet made by Parke, Davis & Co. with the following formula:

Ext. cascara sagrada, 1 grain.
Ext. nux vomica, ⅛ grain.
Ext. belladonna, ⅛ grain.
Powd. ipecac, ⅛ grain.
Resin podophyllin, ⅛ grain.

M. S.: One tablet at bed-time.

This usually causes a free and easy action of the bowels the following morning.

Hydrochloric acid or pepsin may be indicated in some cases. The patient's diet should be carefully regulated. The food should be nourishing, easily digested, and of the least possible bulk—such as milk, soft-boiled eggs, boiled rice, stews, soups, broths, etc., and above all taken at *regular* intervals, avoiding vegetables, coarse bread, hot breads, pies, cakes, puddings, pastries, candies, ice-water, etc.

*Condensed from *St. Louis Clinique*, July, 1895.

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With the above mode of treatment faithfully pursued, the most obstinate cases of chronic gastric catarrh will yield.

Lavage is also indicated in acute alcoholism, acute indigestion, gastric ulcer, gastric cancer, gastric dilatation, acute poisoning, and for diagnostic purposes, etc.

THE USE OF THE THYROID IN INTERNAL MEDICINE.*

By far the best summary of this question which we have seen in any language is that of Dr. Meltzer, who contributes a brief but nevertheless exhaustive paper upon this topic to the *New York Medical Journal* for May 25, 1895. In the first place, using his careful physiological training and literary research as a basis, he shows clearly that practically all the extracts of the various organs, such as the heart, kidney, testicles, lymphatic glands, and bone marrow, do not possess by any means the same rational basis for their use as does the thyroid gland; and, to use his own words, "The treatment of myxœdema is valid upon another more solid basis than the cheap hypothesis which recommends a treatment of disease of the liver by the liver of a wolf, or of impotence by the use of the testicles of the donkey or sheep." Myxœdema is caused by the absence or diseased condition of the thyroid gland—a gland the function of which has been proved by careful research to be the government of certain forms of general nutrition. Further than this, the therapeutic results obtained from the use of testiculine, cardine, ovarine, and similar substances, have been practically *nil*, while the results obtained from the administration of thyroid have been extraordinarily successful. Going on from this general consideration of the value of thyroid in the treatment of myxœdema, Dr. Meltzer points out that the continuous administration of the gland in one form or another is absolutely necessary for the maintenance of the so-called cure. He has employed the powdered substance of the thyroid in a number of cases, and states that in a case of myxœdema which he reported to the German Medical Society of New York in 1894 he employed the desiccated powdered thyroid prepared by Parke, Davis & Co., and returned again and again to its use, always bringing about the desired effect.

He emphasizes the fact, already well understood, that the dose of thyroid is by no means an unimportant question, since overdoses result in labored cardiac action, feeble pulse, great prostration, and general systemic loss of power. All of these disagreeable symptoms can, however, be avoided if the dose is gradually increased, and he recommends that care should be taken to determine the average strength of the thyroid preparation which is to be given. One grain of the powdered thyroid made by Parke, Davis & Co. is about equal to a fifteenth of a thyroid, Meltzer states, and this amount should be given three times a day as the initial dose. Even if this is too much, nothing worse can ensue than tremor, vomiting, and præcordial oppression. Should urticaria be developed, he recommends the employment of one-sixteenth of a grain of pilocarpine three times a day; for general weakness, iron and strychnine; and for any pains or aches, salicylate of sodium and phenacetin. Gradually increasing doses must, as a rule, be employed.

So far Meltzer has only two failures to record: one in which the thyroid administration did not limit the gain in weight, and another in which he had to stop its administration because of profuse diarrhœa. In the successful cases no diarrhœa occurred, so that loss of weight could not have been due to such a cause. When he employed Parke, Davis & Co.'s preparation, as we have already stated, he began with one-grain doses and rarely exceeded three grains. In one instance the patient, who took ten grains a day, lost twenty pounds in the first two weeks. He suggests that in cases of obesity thyroid administration may prove a valuable therapeutic advance, particularly in those cases in which there is a labored cardiac action through the deposit of an excessive quantity of fat about the heart, and he records a case of this character in which the thyroid preparation of Parke, Davis & Co., in the dose of two grains a day, had begun to produce improvement within twenty-four hours.

* Editorial in *Therapeutic Gazette*.

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CANNABIS SATIVA SEU INDICA.

BY DR. R. COWAN LEES.

I prepared a strong aqueous extract of the flowering tops of the female plant, of the usual strength of liquid extracts, and from its use have obtained good and satisfactory results. It possesses the anodyne and soporific action generally ascribed to the resinous extract, although in a modified degree. It has the characteristic odor of the hemp, has a beautiful deep amber color, is miscible with water and hence there is no difficulty in combining it with other liquids, and presents no unseemly immiscible mixture repellent to a patient. Liquor cannabis indicæ gives all the beneficial effects without the drawbacks of the tincture, avoiding those extreme exhilarating conditions bordering on intoxication, which are sometimes met with even when using a medium dose of the latter. It does not seem to interfere with the secretion of mucus from the bronchial glands—a circumstance which renders it superior to opium in those cases suitable for its use, whilst in pulmonary affections generally it acts most favorably as a soporific anodyne.

My greatest experience has been in the treatment of phthisis pulmonalis, and here I cannot speak of it too highly, for, whilst it most perceptibly relieves the cough, it aids the patient by its stimulating and exhilarating qualities, supplying a remedial agent in a manner which in my opinion no other drug can so beneficially do. In indigestion with constipation, and also in many of the affections of children, especially where nervous symptoms are present, it has also done good service. I do not presume for one moment that it will displace opium in those cases where severe pain is a prominent symptom, but I feel sure that in many cases where opium is at present used it may be substituted with great advantage.

The dose which I commonly use is half a fluidrachm for an adult, but it may be increased to a drachm in many cases, whilst for children doses corresponding to age may be adopted, though I have noticed that children are somewhat less susceptible to it than adults.

To avoid as far as possible the presence of resin in the extract, the use of heat must be entirely avoided in the preparation. Messrs. Parke, Davis & Co. have prepared a liquor which I have found suitable.—*The Lancet*, of New York.

FEEDING IN TYPHOID FEVER.*

BY JOSEPH ADOLPHUS, M.D., ATLANTA, GA.

There is nothing that contributes more to attainment of success in the management of typhoid fever cases than scientific feeding of the patient. . . . .

Milk frequently serves as an excellent food after it has been diluted with whey—two parts milk to one of whey,—or it may require to be further diluted—two of whey to one of milk. The whey is readily prepared by adding 20 grains of Parke, Davis & Co.'s pepsin to a pint of milk—beat with an egg-beater till the curd is finely broken up, let stand in a warm place an hour or so, and strain to separate curd from whey. This fluid contains a large part of the milk fat, much proteid in solution, all the salts—a most excellent food of itself, besides being valuable as a diluent. A small part of barley jelly may be added to it when mixed with milk; proportions may be varied—milk one or two parts, or whey one or two parts.

Fat to a certain quantity must be added to prepared milk. I prefer adding to each fluidounce two or three teaspoonfuls of fresh cream; sometimes much less cream had better be used, as the digestive organs of patients suffering from high-temperature disease are decidedly incompetent to dispose of much fat. . . . . .

Not a mite of solid food should be allowed to a typhoid patient, for reasons obvious enough, but I may rehearse these points: Typhoid patients have a special patholysis, the inflammation and ulceration of the small intestine. Solid food irritates these diseased parts, provokes more inflammation, more necrosis of tissue. Perforation, diffused peritonitis, death, are the sequel of solid food. If perchance these extreme results do not occur, the febrile movements and exacerbations and perturbations of the organic and nervous systems are provoked, which do not fail to endanger life, protract the disease, and retard convalescence.

* Extracts from an instructive and practical article in *Chicago Medical Times*, August, 1895.

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TYPHOID FEVER.

BY W. H. A. YOUNG, M.D., SPRINGFIELD, MASS.

I do not consider typhoid fever a contagious disease; neither is it transmitted from one person to another by simple exposure. As a rule, the patient will have been more or less indisposed for some days. When the physician is first called to prescribe for him, he complains of a tired, worn-out feeling, pain in the head and body generally, sometimes chills, constipation, and insomnia. I have never been able to avert the disease, and not always able to recognize it positively until in its second week. When called to typhoid, if possible I place the patient in a spacious room, well ventilated, and remove the bed from the wall in order to allow easy access to all sides of it—I never submit to a feather bed. I commence treatment by relieving the bowels with a mild laxative and enema if required, and give the following: Tinctures of aconite and veratrum viridi, each five to ten minims, in four ounces of water, a teaspoonful every two hours, alternating with Euthymol, four drachms in four ounces of water, same dose. After the bowels are evacuated I give five grains of quinine, three minims of tincture gelsemium, and one minim of tincture nux vomica, in a solution of tartaric acid (five grains to ounce); order a sponge bath every morning; and rub the body over every night with a dry towel. If there is a tendency to diarrhœa, I use the following: Powdered rhubarb one and a half ounces, bicarbonate of soda one drachm, boiling water half-pint, sugar, a little brandy and essence of peppermint; a teaspoonful once every four hours. If more than two evacuations occur in the twenty-four hours, I add to each dose a powder of leptandrin, opium, and chalk or charcoal; if the stools are fetid, two drops saturated solution of carbolic acid to the Euthymol mixture previously mentioned. If cough is troublesome, take two drachms fluid extract liquorice, fifteen minims fluid extract lettuce, ten minims fluid extract squill, one drachm essence of wintergreen, and simple syrup to make a four-ounce mixture, with which the throat may be moistened when there is an inclination to cough. Ten drops of tincture drosera may be added to the sedative mixture (aconite and veratrum) if desired. If the patient takes kindly to milk, I care for no other nourishment. I allow him water, crust-coffee and camphric tea for drink. I seldom give any stimulant until about the seventeenth day, or on approaching crisis, and even then cautiously.

Following this course, I have never had hæmorrhage or troublesome tympanites. It is essential that the physician place his hand on the abdomen and over the bladder every day, looking for soreness and a distended bladder—retention of urine will cause trouble and increase delirium. Following this course of treatment in a severe case of typhoid, the temperature will run from 101° in the morning to 104° in the evening. Everything else being even, ninety-seven out of every hundred should recover, convalescing in about four weeks.—*Medical Age.*

ATROPINE IN UTERINE HÆMORRHAGE.*

BY JOSEPH ADOLPHUS, M.D., ATLANTA, GA.

In several cases of severe uterine hæmorrhage, large doses of atropine sulphate were attended by the most striking and beneficial results. I administer $\frac{1}{60}$ to $\frac{1}{30}$ grain hypodermatically, using Parke, Davis & Co.'s hypodermatic tablets. The same dose is repeated in one to two hours; a third dose, if needful, is given two hours after the second. These large doses of atropine caused dilatation of the pupil and some dryness of the throat, yet there were no symptoms of toxicity.

I must here remark how often I have found it needful to administer large doses of such medicaments under certain conditions of the system to produce desired results. It must be confessed the method is not altogether devoid of danger, and needs extreme caution, but the timid man under such trials in extremity is bound to fail. At no time and under no circumstances is the gift of drawing correct conclusions from small data so absolutely necessary as in such cases.

The physiological action of belladonna, in its active principle atropine, is in a measure simple. It constricts the calibre of the arte-

*Condensed from *Chicago Medical Times*, October, 1894.

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rioles and capillaries, as well as of the large arteries, frequently preventing hardly any blood passing through them.

But while decided action is established on the cerebro-spinal centres, and through the fibres passing from these centres in the brain to the spinal system, the action seems not to be greatly extended to the ganglionic system, for there is no evidence that the great splanchnic systems are largely affected.

It has been found that the minute vessels of the brain and cord may be considerably constricted under atropine, while the vessels of the abdomen, controlled by the splanchnics, may be but slightly affected. When vast vascular areas are dilated by paresis of the vaso-motors, thus presenting passive congestions, other vascular areas may be partly but not greatly paralyzed, thus in a measure breaking the balance of the circulation between the right and the left side of the heart. Under these special conditions atropine is a specific, its action being to strengthen the right side of the heart and the pulmonary circulation, thus pumping out blood from the veins; at the same time circulation through the systemic capillaries is intensified. As a result the tissues are freed from slow-moving blood, and fresh, highly oxygenated blood is conveyed to them.

Atropine is a powerful heart tonic; it strengthens the systole, lengthens the pause, and promotes arterial pressure through stimulation of the vaso-motor system. It thus raises the blood-pressure in two ways—by increasing peripheral resistance, and by promoting stronger ventricular systole. Atropine is therefore an exceptional heart tonic. Part of its properties (acting on the cord-centres) are like those of strychnine, part of its influence is like that of digitalis, and part like that of hydrastis.

When the doses of atropine are physiologically too large, the vaso-motor centres are paralyzed, and the arterioles and capillaries dilate from paresis of the vaso-motor nerves that supply the walls of the small vessels, which are largely made of unstriped muscle fibres; at the same time the heart beats feebler and faster. These excessive doses are promoters of passive engorgements.

Ideas Communicated by Readers

In Post-Partum Hæmorrhage.

Dr. R. C. Binns, Crawfordville, Ga.: "The Normal Liquid Ergot in one case, given at intervals of every fifteen minutes in 20-drop doses, proved highly satisfactory."

Gratifying.

Dr. Theo. Greiner, Naubinway, Mich.: "For your Normal Liquid Ergot, Glycerin Suppositories, Fluid Saw Palmetto Compound, and Liquor Sedâns, I have but words of praise. . . . Your N. L. Ergot has found a place in my obstetric bag and will remain there in the future in preference to any other preparation of ergot."

New Uses for Glycerin Emollient.

Dr. H. J. Achard, Manchester, N. H.: "It is certainly the best preparation of the kind we have. . . . I have noticed with delight that after using the Emollient, simply washing the hands with soap will take away every unpleasant smell. I have used your Emollient in two cases of very obstinate eruptions—one in a baby, all over the face, and one in a woman in the cochlea of the ear. In both cases a few applications gave perfect and lasting results."

From the President of the State Board of Dental Examiners.

A. T. Metcalf, D.D.S., Battle Creek, Mich.: "The fact that Euthymol is placed on the market by Parke, Davis & Co. is a sufficient guaranty that it is a meritorious article.

"I shall always remember with pleasure my visit to your establishment in company with the members of the Tri-State Dental Society in June last. The magnitude of the institution was a great surprise to all who had not visited it before, and to all it was a delightful reception."

"Specially Pleased."

Dr. C. M. H. Wright, Blain, Ill.: "I am specially pleased with the Normal Liquid Ergot, the results in every case being most satisfactory."

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Is it Typhoid?

Dr. A. M. Trowick, Nashville, Tenn.: "Please send me several copies of the 'Woodbridge Abortive Treatment of Typhoid Fever.' I have certainly had pleasant results with the Woodbridge tablets. The only question arising in my mind is: 'Is it typhoid I am treating?' At any rate it is a fever that does not yield to the ordinary course of medication and does yield to the Woodbridge method. . . . For the past twenty years I have tried every antiseptic medicine recommended for this troublesome fever, but have never found one that gave anything like the good results yielded by the Woodbridge treatment."

As a Vehicle for Potassium Iodide.

Our representative, Dr. W. H. Davis, reports the custom prevailing among a number of physicians on the Pacific coast, and gaining in favor, *i.e.*, the administration of potassium iodide in Esencia de Coca in cases where the stomach is irritable. Positive intolerance of the iodide may thus be overcome.

"Pure and Acceptable to the Most Delicate Stomach."

Dr. I. G. A. Davies, Canaseraga, N. Y.: "The Improved Lofoten Oil I have used extensively, and I pronounce it the very best in existence, being pure and acceptable to the most delicate stomach. The Pil. Evacuant is the best laxative in my pocket-case. Euthymol, used as a spray for laryngeal catarrh, yields me excellent results. I have found Liquor Sedans the best general remedy for uterine disturbances, and I always have it by me. Cascara et Salol is my last general recipe for rheumatism. I find the NOTES exceedingly useful, and anxiously look for each number."

Nuclein in Membranous Laryngitis.

Dr. G. W. Greenleaf, Somerville, Mass., narrates a case which progressed favorably under general treatment until the morning of the fourth day, when sudden collapse became imminent. No emesis followed repeated doses of cupric sulphate, turpeth mineral, and ipecac. Atropine, strychnine and brandy were administered subcutaneously with little good. Fifteen minims of Nuclein was then injected into the thigh; a half-hour later, 20 minims, and this last dose repeated every hour. After the first dose, ipecac was repeated and emesis followed; the cyanosis disappeared, and within twenty-four hours the pulse was stronger and regular. Dr. Greenleaf declares himself satisfied as to the efficiency of Nuclein in this case, and will henceforth use it from the outset of an attack.

Utility of a Good Catalogue.

Dr. M. H. Virden, Columbus, O.: "I served fourteen years behind the prescription-counter until I graduated in medicine, and I cannot praise your catalogue too highly as a valuable aid to the druggist and physician."

An Excellent Idea.

Dr. David P. Jackson, New Bedford, Pa., suggests that country practitioners keep on hand a supply of tablet triturates containing a variety of frequently used medicaments, such as iron, strychnine, arsenic, caffeine, etc., and combine them to meet the indications in each case by enclosing several tablets in a No. 3 capsule. Thus any desired combination may be obtained and accuracy in dosage insured.

Swears by It.

Dr. W. H. Bentley, Woodstock, Ky.: "I nearly swear by your Lofoten Cod-liver Oil. In my hands it has proved to be better than all other cod-liver oils and emulsions I have ever used.

"I suppose I have used one hundred bottles of your Syrup Trifolium Compound in my practice. My experience with this alterative has been most gratifying."

Nuclein in Diphtheria.

The same gentleman reports, under date of May 10, a remarkable experience with our Solution of Nuclein, in conjunction with other treatment, during an epidemic of diphtheria in his neighborhood. He, and a medical student who assisted him, treated over forty cases, without a single death when the patients were seen in the early stages of the disease.

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Liquor Sedans in Dysmenorrhœa.

Dr. R. B. Travis, Camden, Tenn., relates the case of Mrs. W. H——, 40 years old, a long sufferer from dysmenorrhœa and hysteria: "She lapsed into such a state that her attending physician said he could do nothing further for her, pronouncing her a maniac; legal papers were made out to send her to the State asylum at Bolivar. I was called and decided she was not a proper subject for an insane asylum. The principal remedy in my treatment for the dysmenorrhœa was Liquor Sedans. Mrs. H—— is now on the high road to recovery.

"I gave a bottle of your Lofoten Cod-liver Oil to Mrs. A——, 52 years old, greatly emaciated by long suffering from ovarian disease. She had a horror of cod-liver oil, but declares your preparation to be most palatable and elegant. She believes it has been a great benefit to her."

Quality of Cascara Products.

Dr. Julius Silberstein, Surgeon U. S. Indian Service, Fort Apache, Arizona: "Your preparations of the cascara come up to your usual high standard and are better than any others on the market."

Rhus Poisoning.—Dr. Vogt, of Cleveland, Ohio, in the *Louisville Medical Monthly*, declares nothing will relieve the poisoning by rhus so quickly as a solution of *Grindelia robusta*. He prescribes:

℞ Ext. grindelia robusta (P., D. & Co.), 4 drachms.
Distilled water, 8 ounces.

He applies to the affected parts either cold or tepid, and freely, with a sponge or cloth dipped in the solution.

"A few applications will often suffice for a cure, but if the disease has been of long duration several days may elapse before entire relief is obtained. In very bad cases a soft bandage should be applied to the parts and kept moist with the solution, and if necessary the latter reinforced by more of the fluid extract. The sufferings of the patient will be immediately relieved after the first application."

Gleanings.

Germain See on Nuclein: "We have tested it in pneumonia, pleuritis, and other inflammatory and infectious diseases. In three cases of severe alcoholic and albuminuric pneumonia, a manifestly favorable influence was exerted by the Nuclein on the course of the disease."

In Asthma.—

℞ Fl. ext. Grindelia robusta (P., D. & Co.), 1 ounce.
Simple syrup, 3 ounces.

M. Sig.: One teaspoonful at the commencement of a paroxysm will give complete relief in from three to five minutes. Continue the remedy, same dose, three or four times daily, for a few weeks.

Hydrastinine hydrochlorate has been very successfully employed by Kallmorgen in many cases of uterine hæmorrhage. The results were most satisfactory in hæmatocele, menorrhagia, hæmorrhage after abortion or in consequence of diseased adnexa. Dose, one-half to one grain thrice daily. This salt is manufactured by us, and will shortly be added to our price list.

The Diet of Nursing Mothers.—S. H. Platt, M.D., Springfield, Mass., recommends Mosquera's Beef Meal as yielding the needful quota of proteids when a mother finds herself incompetent to take about ninety-five ounces of food, one-third being milk. At the same time she should be careful to approximate the required 4214 calorics of energy by concentrated fats like butter or sweets like sugar, with enough fruit carbohydrates to sustain the energy of the digestive functions.

For Bronchitis and Certain Stages of Pneumonia.—

℞ Fl. ext. Eriodictyon (P., D. & Co.), 1 ounce.
Solution of potassa, 1 drachm.
Fl. ext. Grindelia robusta (P., D. & Co.), 1 ounce.
Tincture opium comp. (P., D. & Co.), 1 ounce.
Syrup squill or syrup ipecac, 1 ounce.

M. Sig.: Teaspoonful every three hours.

Taka-Diastase in Diabetes.—Lépine records the result of the treatment of four cases of diabetes mellitus with a ferment prepared from malt. In all there was distinct improvement. The excretion of sugar averaged in each about 140 grammes every twenty-four hours, but under the use of Taka-Diastase the average was reduced to 70 grammes. Taka-Diastase is not diuretic; it has no injurious effects, but the improvement is only temporary.—*Medical Age.*

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Our Sincerest Thanks.—The editor of the *Kansas City Medical Index* writes in the September number of that journal: "Parke, Davis & Co., that most excellent firm of manufacturing chemists whose name is familiar to every doctor in the land, have an advertisement in the *Journal of the American Medical Association* for August 17, 1895, covering eight pages, which is a masterpiece; clear, clean, honorable, every word and line full of valuable information; in fact, just like Parke, Davis & Co.'s work—perfect."

When properly prepared in accordance with the U. S. P. 1890, Blaud's Pills contain a specific quantity of ferrous carbonate of a bright green color, which is formed during the manufacture of the mass, from a reaction between the ferrous sulphate and potassium carbonate employed. The brown color and dull appearance of pills made by the old formula are due to an excess of potassium carbonate.

We shall be pleased to submit specimens of our beautiful Blaud's Pill on application.

Golden Words.—"The agents of reputable manufacturing houses are as a class gentlemanly and unobtrusive. Many of them are young physicians thoroughly entitled to respect. I am not ashamed to say that I have learned many points of value in talking with such men and have seen some very pretty and striking demonstrations in my office. And yet some men who are ethically gentlemen prove themselves practically boors by their reception of agents, forgetting that civility costs little and is worth much."—DR. CHAS. E. WARREN, Roslindale, Mass.

In senile heart, when we find the patient loaded down with fat, a lax abdomen, and distended intestines, the following will give good results:

℞ Rubidium iodide, 2 drachms.
Fl. ext. Adonis vernalis (P., D. & Co.), 1 drachm.
Fl. ext. cascara sagrada (P., D. & Co.), 1½ drachms.
Fl. ext. wahoo (P., D. & Co.), 1½ drachms.
Fl. ext. leptandra (P., D. & Co.), 1½ drachms.
Simple elixir or glycerin, to make 2 ounces.

M. Sig.: Take one-half teaspoonful before meals and one hour after, in a wineglassful of water.

The Tablet System Given a Black Eye.—The tablet system, which has been in vogue at the St. Louis City Dispensary for several years, received something of a black eye from the new Health Commissioner, Dr. M. C. Starkloff, at the meeting of the Board of Health recently. In a communication to the Board the Doctor recommended that the tablet system be abolished, and that the city provide regular medicine to be put up by a druggist—this, he says, would be far more beneficial and not much more expensive. The practice of dispensing medicine in prepared tablets, he thinks, has been anything but satisfactory. The recommendations were adopted, with the change, however, that the tablet system be not abolished entirely, but used in only mild cases.—*Exchange.*

In cases of subacute rheumatism the following will give quick relief:

℞ Fl. ext. cimicifuga (P., D. & Co.), 5 drachms.
Fl. ext. jaborandi (P., D. & Co.), 5 drachms.
Fl. ext. manaca (P., D. & Co.), 5 drachms.
Fl. ext. piscidia (P., D. & Co.), 5 drachms.

M. Sig.: Give 20 drops every three hours, in a tablespoonful of water.

If the parts are painful, the following will give quick relief:

℞ Ichthyol, 1 ounce.
Water, 8 ounces.

Mix, and apply to the parts every four hours; cover with cotton.

Nuclein in Tuberculosis.—Dr. F. W. Garber cites ten cases of tuberculosis, one of neurasthenia, one of follicular tonsillitis, and one of troublesome sinus with phlegmonous cellulitis induced by a sloughing tendon leading from the second finger high into the palm of the hand, all benefited by Vaughan's Nuclein. He concludes it is of value in incipient tuberculosis; whether positively curative or not he is yet in no position to say, but believes by its early use it is possible to give patients a longer lease of life and very much more comfort. If the patient be in position to take advantage of favorable climatic conditions, he has great faith in the complete restoration to health by the use of Nuclein of a large number of persons now dying under other treatment.—*Medical and Surgical Reporter.*

Syrup Chloride of Iron (Weld's).—Each tablespoonful of this preparation is said to be equivalent to twenty drops of the official tinctura ferri perchloridi, and our analysis practically confirms this statement. It is acid to test paper, gives a blue precipitate with prussiate of potash, increased on the addition of hydrochloric acid; no coloration with sulphocyanide of potassium until similarly treated, and no precipitate with ammonium hydrate. Alkaline copper solution is rapidly reduced. These results contribute to show that the preparation consists of a carefully made combination of syrup

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with perchloride of iron. Although it is characterized by a sweet and inky taste, it has not that marked action on the teeth which forms a drawback to the general administration of ordinary compounds of iron. In short, it would seem to possess all the advantages of an efficient iron salt.—*Lancet* (London).

Hypodermatic Syringes.—All syringes emanating from our laboratory are given the very closest scrutiny upon receipt from the manufacturer. We also examine carefully each and every syringe taken from shelf stock, before supplying on requisitions of our customers. Any syringe showing the least deficiency is thrown into a box for attention at the hands of our own Mechanical Department.

It is a well known fact that the leather washers and cups will get slightly out of tone if exposed for a continued time to untoward influences. A syringe in use will be very much more satisfactory than one which has been put aside for a time.

A large quantity of needles purporting to be of our manufacture are to be found in the market, and we have found it necessary to have the initials P. D. & Co. stamped upon the shank of all needles emanating from our laboratory, in order to identify them.

Liquor Sedans.—There are a number of much lauded and widely advertised remedies on the market which claim to be almost specific in dysmenorrhœa, utero-ovarian troubles, etc., but which fall far short of the mark. We are pleased to be able to say, however, that the preparation known as Liquor Sedans (P., D. & Co.) will fulfill the purpose where such a remedy is indicated. It is composed of black haw, golden seal, and Jamaica dogwood, so combined with aromatics as to make a very palatable preparation, being in this respect unlike most of a similar nature, and will be taken without reluctance by those patients to whom medicine is usually repugnant. Dr. Wilcox, of New York, recites a number of cases in which he has employed it with marked success. He pronounces it a typical utero-ovarian sedative and a very effective remedy in irregularities of the utero-ovarian functions. It is free from the stigma of being proprietary, differing from many of this class of remedies, and so can be prescribed without hesitation by those who are opposed to proprietary articles. Parke, Davis & Co., who have given the profession so many original and reliable preparations, prepare it.—*Massachusetts Medical Journal.*

A. Longstreet Taylor, A.M., M.D., writes in the *Northwestern Lancet* for July 15:

"In the use of antitoxin, local and general treatment should not be neglected, and I desire on this occasion to report on the use of Professor Loeffler's solution for the local treatment of diphtheria. His solution consists of menthol, 10 grains; toluene, q. s. ad 36 Cc.; creolin, 2 Cc.; iron chloride solution, 4 Cc.; alcohol, q. s. ad 100 Cc. It is prepared by Parke, Davis & Co. The directions for its use are that it is to be gently held against the infected part on a cotton-wrapped probe for ten seconds. Applications to be repeated every three hours. When so applied the membrane is broken up into shreds without any mechanical force being used and without exposing a bleeding surface. One case in an adult that I treated exclusively with this solution did remarkably well. An application of Professor Loeffler's solution was made to the interior of the thoroughly cocainized larynx with the cotton applicator, and although it caused a prolonged spasm of the larynx it was very efficacious. It was not necessary to repeat it, as the patient improved steadily."

Normal Liquid Coca.—Since the discovery of the anæsthetic properties of the alkaloid cocaine, coca itself has received increased attention. Many new preparations have from time to time been suggested or prepared, each having as its object the presentation of the drug in such a form that its full effect might be obtained. That all of these are improvements on the old form in which it was and still is administered, viz., the fluid extract, we would by no means say. But one preparation, which owes its introduction to the stimulus above mentioned, well deserves notice in this connection. The preparation we refer to is the "*normal liquid coca*," of which the makers claim that in its manufacture is used only a leaf that by previous assay has been shown to contain a certain percentage of the alkaloid cocaine, and furthermore that the resulting product is brought to a certain standard by another determination of its alkaloidal strength: which strength, and a method of verifying it, are designated on the label accompanying the package.

This method of rendering exact and reliable preparations which hitherto have been characterized by more or less variability and uncertainty, cannot be too much encouraged, and the firm that introduces them should be rewarded for their efforts by unmistakable evidence of our appreciation.—*Louisville Medical News.*

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The

WOODBRIDGE TREATMENT

OF

TYPHOID FEVER.

If this treatment is begun early, no other medicine will be needed, and if intelligently carried out will rarely if ever fail to abort typhoid fever. — DR. JOHN ELIOT WOODBRIDGE, in *Journal of American Medical Association*. . . . . .

In the space allotted to this advertisement the Treatment cannot be fully explained. Send in COUPON attached and receive by return mail detailed information with reports of cases. . . . . .

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PARKE, DAVIS & COMPANY,

DETROIT, MICH.

GENTLEMEN:—Please send me your monograph upon the **WOODBRIDGE TREATMENT OF TYPHOID FEVER.**

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Diphtheria Antitoxin

PRICES REDUCED.

$1.25 PER VIAL,	600 UNITS.
$2.25 PER VIAL,	1000 UNITS.
$3.50 PER VIAL,	1500 UNITS.

A strictly reliable Serum prepared after the method of Behring and Roux. Is absolutely sterile, and is put up in vials of 10 Cc. each. : : : : : : : : : : : : :

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Glycerin Suppositories.

An Eligible Method of Relieving Constipation Without Disturbing the Stomach. . .

Neat.
Cleanly.
Convenient.
Prompt in Action.
Devoid of Danger.

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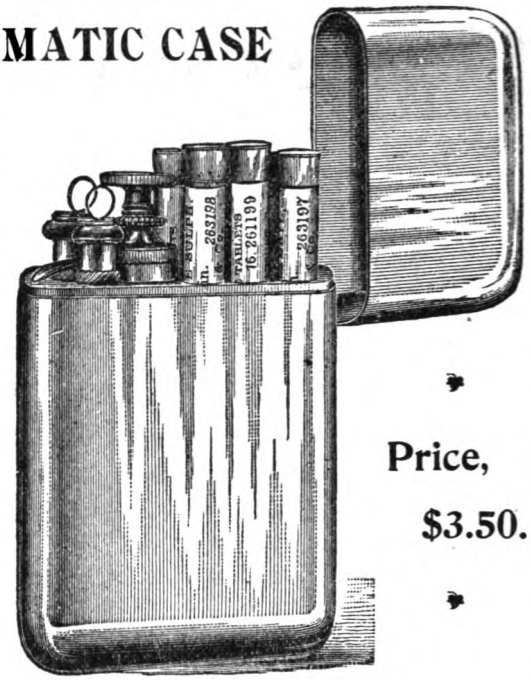
IMPROVED HYPODERMATIC CASE

MADE OF PURE ALUMINUM—LIGHT, COMPACT, CONVENIENT SHAPE, AND WILL NOT TARNISH. . . . . .

Contains Tablets in Tubes of 25 each, as follows:

Apomorphine Hydrochlorate,	1-10 gr.
Atropine Sulphate,	1 50 gr.
Cocaine Hydrochlorate,	1 4 gr.
Morphine Sulphate,	1-4 gr.
Strychnine Nitrate,	1-40 gr.
Morphine and Atropine: Morphine Sulph., 1-4 gr. Atropine Sulph., 1-150 gr.	



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Detroit, New York, Kansas City, New Orleans, London, Eng., and Walkerville, Ont.

A Pinch of Salt In a Cup of Hot Water

is quite as nourishing as beef-tea or beef-extract, because boiling water will not extract the nourishing, bone- and tissue-building, life-sustaining properties of meat—only the soluble salts. The residual fibre remaining after extraction contains all the nutritive matter.

Mosquera's Beef-Jelly and Fluid Beef-Jelly

possess not alone the soluble salts of the beef and its characteristic savor, but in addition a large proportion of *nutritive fibrin, predigested* and rendered soluble by the action of the digestive ferment Bromelin. Mosquera's Beef-Jelly is beef-extract plus predigested nutriment.

Palatable. :: Invigorating. :: Nourishing.

Mosquera's Fluid Beef-Jelly possesses just half the strength of the solid preparation. For use when a cold beverage is desired, or for instantaneous solution.

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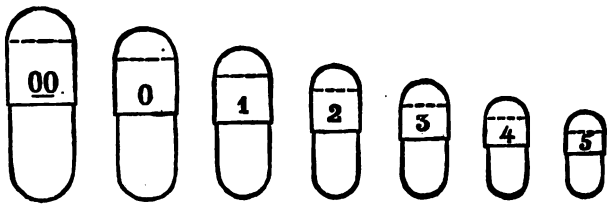
EMPTY CAPSULES

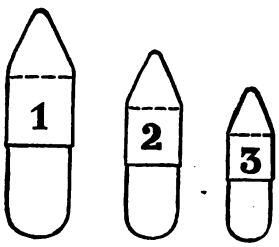


Finest Gelatin. Superior Finish. Uniform in Size.

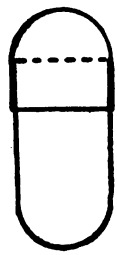
Caps and Bodies Perfectly Joined--Absolute Protection Against Leakage.

Do practitioners stop to consider that a BITTER TABLET, either triturate or compressed, or an uncoated pill, can in an instant of time be crushed and placed within a Gelatin Capsule, thereby insuring its more ready solubility and at the same time securing palatability that cannot otherwise be obtained?

Empty Rectal Suppository Capsules.

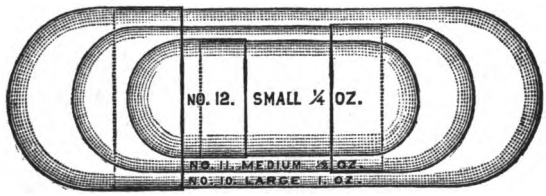


Special Size Adapted for Various Purposes.



Capacity, about 2.75 Cc. or 1-10 ounce.

Extra-Sized Empty Capsules for Veterinary or Vaginal Purposes.



Parke, Davis & Co., Detroit, New York, Kansas City, New Orleans, U. S. A.
London, Eng., and Walkerville, Ont.

LONDON, ENG., AND WALKERVILLE, ONT.

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Nuclein Solution Improved [P. D. & CO.]

Is prepared according to the formula of Victor C. Vaughan, M.D., Ph.D., Professor of Hygiene in the University of Michigan. It increases the number of white blood-corpuscles and stimulates the activity of those organs whose function it is to protect the body against infectious diseases. It has been used with benefit in *initial* cases of tuberculosis, in streptococcus diphtheria, typhoid fever, malaria, membranous tonsillitis, etc.

Contains one per cent. Nucleinic Acid from yeast; which Nucleinic Acid has a Phosphorus content of six per cent.

Beware of the so-called Nuclein Solutions which are strongly alcoholic. True Nuclein is insoluble in alcohol.

Clinical reports as to the value of Nuclein (P. D. & Co.) in tubercular diseases, diphtheria, typhoid fever, malaria, etc., together with reprints of papers by Prof. Victor C. Vaughan and Dr. Chas. T. McClintock, promptly mailed upon request.

Special Note! **Please do not confound NUCLEIN (P. D. & Co.) with PROTO-NUCLEIN, a proprietary preparation the formula of which is best known to its manufacturers.** . . . . . .

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When you are in need
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You are in need
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The materials of which Parke, Davis & Company's Hypodermatic Tablets are composed are absolutely non-irritant in character, and each Tablet may be relied upon to contain precisely the quantity of medicament stated on the label. They disintegrate instantly, with a resultant perfectly bland and transparent solution. In every way reliable. . . . . .

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